11/18/2009 16:22

Image# 29993355651

FEC FORM 3X

NAME OF

COMMITTEE (in full)

ADDRESS (number and street)

Check if different than previously

reported. (ACC)

C00106146

TYPE OF REPORT

(a) Quarterly Reports:

April 15

July 15

(TER)

Covering Period

Signature of Treasurer

Office

Use

Only

Type or Print Name of Treasurer

October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE)

July 31 Mid-Year

Report(Non-election Year Only) (MY)

Termination Report

10

Electronically Filed by

Quarterly Report(Q1)

Quarterly Report(Q2)

(Choose One)

FEC IDENTIFICATION NUMBER

American Hospital Association PAC

1.

REPORT OF RECEIPTS AND DISBURSEMENTS

OR TYPE OR PRINT ₩

Suite 700

Washington

(b) Monthly

(c)

(d)

0 1

Ms. Melinda Hatton

Report

Due On:

12-Day

30-Day

For Other Than An Authorized Committee

Office Use Only **USE FEC MAILING LABEL** Example:If typing, type over the lines 325 Seventh Street, NW DC 20004 **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** Χ REPORT OR (N) (A) Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) Primary (12P) General (12G) Runoff (12R) PRE-Election Report for the: Convention (12C) Special (12G) in the Election on State of Runoff (30R) Post -Election General (30G) Special (30S) Report for the: in the Election on State of 2009 10 3 1 2009 through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton 11 18 2009 Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. **FEC FORM 3X**

(Rev. 12/2004)

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2 / 178

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name	
American Hospital Association PAC	

D " D 1.0 1 0 0 1 2009 31 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 1339674.06 January 1 (b) Cash on Hand at 1740792.22 Begining of Reporting Period 232798.41 1420539.72 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1973590.63 2760213.78 6(a) and 6(c) for Column B) 110176.28 896799.43 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 1863414.35 1863414.35 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 178

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period:

From:

D D 0 1

м м 1 0 2009

та.

м м 1 0 ^D 31

^Y 2009

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	141325.91	623827.13
	(ii) Unitemized	54653.86	273599.03
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	195979.77	897426.16
(I	b) Political Party Committees	0.00	0.00
`	c) Other Political Committees (such as PACs) d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	195979.77	897426.16
	Fransfers From Affiliated/Other Party Committees	36575.00	498361.00
3. A	All Loans Received	0.00	0.00
	oan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other Political Committees	0.00	22000.00
	Other Federal Receipts Dividends, Interest, etc.)	243.64	2752.56
	Fransfers from Non-Federal and Levin Funds		
(;	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(I	b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	232798.41	1420539.72
	otal Federal Receipts subtract Line 18(c) from Line 19)	232798.41	1420539.72

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 178

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	258.78	5490.24
Expenditures(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii) and (b))	▶ 258.78	5490.24
Transfers to Affiliated/Other Party Committees	0.00	0.00
3. Contributions to		0.00
Federal Candidates/Committeesand Other Political Committees	107000.00	887491.69
Independent Expenditure (use Schedule E)	0.00	0.00
Coordinated Expenditures Made by Party		
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	0.00	900.00
Than Political Committees		900.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contribution Refunds		5.30
(add Lines 28(a), (b), and (c))	> 0.00	900.00
9. Other Disbursements	2917.50	2917.50
D. Federal Election Activity (2 U.S.C 431(20	0))	
(a) Shared Federal Election Activity	··	
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirel With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).	0.00	0.00
Total Disbursements (add Lines 21(c),	22,	
23, 24, 25, 26, 27, 28(d), 29 and 30(c)).		896799.43
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	110176.28	896799.43

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 178

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	195979.77	897426.16
44. Total Contribution Refunds (from Line 28(d))	0.00	900.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	195979.77	896526.16
66. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	258.78	5490.24
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	258.78	5490.24

FE6AN026

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 178 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins		Date of Receipt
Mailing Address 6180 Lower Mountain		10 02 2009
City	State Zip Code	Transaction ID: 17584488
New Hope	PA 18938-5760	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Sr. VP., Health Economics	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	283.78	
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt
Mailing Address 23 E. Delaware Aven	ue	M M / D D / Y Y Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1 1
City	State Zip Code	Transaction ID: 17584489
Pennington	NJ 08534-2302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Ostaszewski		Date of Receipt
Mailing Address 54 Bay Way		10 02 7 9 9 9
City	State Zip Code	Transaction ID: 17584501
Brick	NJ 08723-7361	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer HEALTHSOUTH Rehabilitation Hospital of	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		510.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for	nformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
M: M:	ıll Name (Last, First, Middle Initial) s. Clare Sapienza-Eck ailing Address 7712 Central Avenue, V	West		Date of Receipt 1 0 0 2 2 0 0 9
Ci		State	Zip Code	Transaction ID: 17584507
FE	ea Isle City CO ID number of contributing Defal political committee.	C	08243-1236	Amount of Each Receipt this Period 250.00
_	eme of Employer buth Jersey Healthcare eceipt For: Primary Other (specify)		on sident Strategic Planning and e Year-to-Date ▼ 250.00	d]
B. M	ıll Name (Last, First, Middle Initial) r. Michael Hrickiewicz ailing Address One North Franklin			Date of Receipt
Ci	ty	State	Zip Code	1 0 0 2 2 0 0 9 Transaction ID: 17588230
<u>C</u>	hicago	<u>IL</u>	60606-3436	Amount of Each Receipt this Period
fee	EC ID number of contributing deral political committee.	C		250.00
<u>tic</u>	ame of Employer merican Hospital Associa- n-Chicago exceipt For: Primary General Other (specify)	•	ealth Facilities Management e Year-to-Date 250.00	
	ıll Name (Last, First, Middle Initial)			
	r. Chris Anderson ailing Address 2809 Denny Avenue			Date of Receipt 1 0 0 5 2 0 0 9
Ci	ty	State	Zip Code	Transaction ID: 17588973
<u>P</u>	ascagoula	MS	39581-5300	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		250.00
<u>er</u>			ecutive Officer	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
				750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Larry C. Bourne Mailing Address 424 Autumn Oak [Date of Receipt M
City Madison	State Zip Code MS 39110-9148	Transaction ID: 17588986
FEC ID number of contributing federal political committee.	C 39110-9146	Amount of Each Receipt this Period
Name of Employer HPI Company Receipt For:	Occupation President and CEO Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	260.00	
Full Name (Last, First, Middle Initial) Mr. Sam W. Cameron Mailing Address 28 Waterford Place	е	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17588991
<u>Jackson</u>	MS 39211-2945	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	17.50
Name of Employer Mississippi Hospital Asso- ciation	Occupation President & Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00	
Full Name (Last, First, Middle Initial) Mr. Guy Geller		Date of Receipt
Mailing Address P O Box 351		10 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17589011
Magnolia	MS 39652-0351	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	172.50
Name of Employer Beacham Memorial Hospital	Occupation Administrator and Chief Executive Off	<u> </u>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 297.50	
SURTOTAL of Receipts This Page (antion	al)	200.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 178 (check only one) X 11a
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		
Mr. G. Douglas Higginbotham Mailing Address P O Box 607		Date of Receipt
City	State Zip Code	10 05 2009
Laurel	MS 39441-0607	Transaction ID: 17589019 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 3344 3607	10.00
Name of Employer South Central Regional Me- dical Center	Occupation Executive Director	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 560.00	
Full Name (Last, First, Middle Initial) Mr. Steve Lesley		Date of Receipt
Mailing Address P.O. Box 1909 116 Woodgreen Cross		10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17589031
Madison	MS 39130-1909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	56.68
Name of Employer Mississippi Hospital Asso- ciation	Occupation Director of Data Services	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 244.04	
Full Name (Last, First, Middle Initial) Mr. Kurt W Metzner		Date of Receipt
Mailing Address 1225 North State Stre	et	10 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17589038
<u>Jackson</u>	MS 39202-2064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer Mississippi Baptist Health System	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 905.00	
SUBTOTAL of Receipts This Page (optional)		71.68

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Ken Posey, , FACHE Mailing Address P O Box 527		Date of Receipt 10 05 7 2009
City Bay Springs	State Zip Code MS 39422-0527	Transaction ID: 17589053 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Jasper General Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. David Putt		Date of Receipt
Mailing Address 2500 North State S	10 05 2009	
City	State Zip Code	Transaction ID: 17589054
<u>Jackson</u>	MS 39216-4500	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer University Hospitals and Health System	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00]
Full Name (Last, First, Middle Initial) Mr. W. Kent Rogers		Date of Receipt
Mailing Address 835 Medical Cente	r Drive	10 05 7 9 9
City West Point	State Zip Code MS 39773-9320	Transaction ID: 17589056
FEC ID number of contributing federal political committee.	C 39/73-9320	Amount of Each Receipt this Period 405.00
Name of Employer Clay County Medical Corpo- ration	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00]
SUPTOTAL of Possints This Page (ention	al)	710.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James P Alender		Date of Receipt
Mailing Address 2601 Greentree Lan	е	10 02 7 2009
City	State Zip Code	Transaction ID: 17589158
Kokomo	IN 46902-2951	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Howard Regional Health Sy-	Occupation President and Chief Executive Officer	
stem Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Robert J Brody		Date of Receipt
Mailing Address 1805 Braeburn Drive	9	M M / D D / Y Y Y Y Y Y Y 1 0 0 2 2 0 0 9
City	State Zip Code	Transaction ID: 17589176
Carmel	IN 46032-8364	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer SSFHS - St. Francis Hospi- tal and Healt	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas Crawford		Date of Receipt
Mailing Address 700 Forest Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17589184
Frankfort	IN 46041-2636	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Vincent Frankfort Hos- pital	Occupation Chief Executive Officer]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
<i>A</i>	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Kyle De Fur, , FACHE			Date of Receipt
	Mailing Address 6262 S. Hunters Run			10 02 2009
	City Pendleton	State IN	Zip Code 46064-8708	Transaction ID: 17589187 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer St. Vincent Indianapolis Hospital	Occupation Presiden		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
_ 3.	Full Name (Last, First, Middle Initial) Mr. Bradford W Dykes			Date of Receipt
	Mailing Address 104 Windamere Circle	•		10 02 2009
	City	State	Zip Code	Transaction ID: 17589195
	Bedford FEC ID number of contributing federal political committee.	C	47421-9604	Amount of Each Receipt this Period 250.00
	Name of Employer Bedford Regional Medical Center	Occupation Presiden	n t and Chief Executive Office	r
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
- :.	Full Name (Last, First, Middle Initial) Dr Charles C Hedde, , M.D.	1		Date of Receipt
	Mailing Address 129 Lakewood Drive			10 02 2009
	City	State	Zip Code	Transaction ID: 17589240
	Vincennes FEC ID number of contributing federal political committee.	C	47591-3701	Amount of Each Receipt this Period 250.00
	Name of Employer Good Samaritan Hospital	Occupation Vice Pres	n sident Medical Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		\	1000.00
	TOTAL This Period (last page this line number	only)	·	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 178 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person go the name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Katherine Humphreys		Date of Receipt
Mailing Address 502 N. Ironwood [Drive	10 02 2009
City	State Zip Code	Transaction ID: 17589247
South Bend	IN 46615-3206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Vincent Health	Occupation Chief Advocacy Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. James J. Myers		Date of Receipt
Mailing Address 2626 Windermere	Woods Drive	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17589279
Bloomington	IN 47401-5451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bloomington Hospital	Occupation CFO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Martin Padgett		Date of Receipt
Mailing Address 1606 Fox Run Tra	il	10 02 2009
City	State Zip Code	Transaction ID: 17589287
Jeffersonville	IN 47130-8204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Clark Memorial Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	nal)	1000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 178 (check only one) X
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Dr. Jon D. Rahman, M.D.		Date of Receipt
	Mailing Address 418 Burlington Lane		10 02 2009
	City Carmel	State Zip Code IN 46032-9162	Transaction ID: 17589294 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer St. Vincent Health	Occupation Chief Medical Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Brian Tabor		Date of Receipt
	Mailing Address 10762 Forest Lake Co	10 02 2009	
	City	State Zip Code	Transaction ID: 17589324
	Indianapolis	IN 46278-9610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer Indiana Hospital Associat- ion	Occupation Vice President of Government Relation	ons
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	525.00	
	Full Name (Last, First, Middle Initial) Mr. Thomas J. VanOsdol		Date of Receipt
	Mailing Address 13772 Wyandotte Pla	10 02 2009	
	City	State Zip Code	Transaction ID: 17589328
	Fishers FEC ID number of contributing federal political committee.	IN 46038-4500	Amount of Each Receipt this Period 250.00
	Name of Employer Saint John's Health System	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SURTOTAL of Receipts This Page (optional)		775.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. Steven J West Mailing Address 314 E. Hickory Grove City	State	Zip Code	Date of Receipt 10 02 2009 Transaction ID: 17589336
	Hartford City FEC ID number of contributing federal political committee.	C	47348-1011	Amount of Each Receipt this Period 250.00
	Name of Employer Blackford Community Hospital Receipt For: Primary General Other (specify) ▼		ecutive Officer e Year-to-Date 250.00	
3.	Full Name (Last, First, Middle Initial) Mr Bruce D Begley Mailing Address 1305 North Elm Street			Date of Receipt 10 05 2009
	City	State	Zip Code	Transaction ID: 17589879
	Henderson FEC ID number of contributing federal political committee.	C	42420-2783	Amount of Each Receipt this Period 500.00
	Name of Employer Methodist Hospital	Occupation	n e Director	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Michael T. Rust			Date of Receipt
	Mailing Address 937 Woodland Heights	10 05 2009		
	City	State	Zip Code	Transaction ID: 17589881
	Louisville FEC ID number of contributing federal political committee.	C	40245-5219	Amount of Each Receipt this Period 500.00
	Name of Employer Kentucky Hospital Associa- tion		t and Chief Executive Office	<u> </u>
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1250.00
	TOTAL This Period (last page this line number of	anly)	•	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or 1	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
 	Full Name (Last, First, Middle Initial) Mr. Milton Brooks Mailing Address 850 Riverview Avenue		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 17589883
	Pineville FEC ID number of contributing federal political committee.	KY 40977-1430	Amount of Each Receipt this Period 500.00
	Name of Employer Pineville Community Hospi- tal Associati Receipt For: Primary General Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	
i.	Full Name (Last, First, Middle Initial) Mr. Greg Kiser Mailing Address P O Box 769		Date of Receipt 1 0 0 5 2 0 0 9
	City	State Zip Code	Transaction ID: 17589885
	Louisa	KY 41230-0769	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Three Rivers Medical Cent- er	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Ms. Connie Smith		Date of Receipt
	Mailing Address P O Box 90010		10 05 2009
	City	State Zip Code	Transaction ID: 17589886
	Bowling Green	KY 42102-9010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Medical Center at Bowling Green, The	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SI	JBTOTAL of Receipts This Page (optional)		1250.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persole name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Mrs. Susan Stout Tamme, , FACHE Mailing Address 4000 Kresge Way		Date of Receipt
	City	State Zip Code	1 0 0 5 2 0 0 9 Transaction ID: 17589887
	Louisville	KY 40207-4605	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Baptist Hospital East	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Harold C Warman, , Jr., FAC Mailing Address P O Box 668		Date of Receipt
		10 05 2009	
	City	State Zip Code	Transaction ID: 17589888
	Prestonsburg FEC ID number of contributing federal political committee.	KY 41653-0668	Amount of Each Receipt this Period 500.00
	Name of Employer Highlands Regional Medical Center	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) John A Johnson	1	Date of Receipt
	Mailing Address 200 Abraham Flexner	10 05 2009	
	City Louisville	State Zip Code KY	Transaction ID: 17589889
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
	Name of Employer Jewish Hospital & St. Mar- y's HealthCar	Occupation VP/General Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Γ,	SUBTOTAL of Receipts This Page (optional) .		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 178 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S	Statements may	v not be sold or used by any pers	13 14 15 16 on for the purpose of soliciting contributions
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)			
Mr. David Laird Mailing Address 211 Coralberry Road			Date of Receipt 1 0 0 5 2 0 0 9
City	State	Zip Code	Transaction ID: 17589890
Louisville	KY	40207-5712	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Norton Healthcare	Occupation	n ministrative Officer	
Receipt For:	, '	Year-to-Date ▼	\dashv
Primary General Other (specify) ▼	Aggregate	250.00	
Full Name (Last, First, Middle Initial) Ms Terresa O Booher	•		Date of Receipt
Mailing Address 5000 KY Route 321			10 05 2009
City	State	Zip Code	Transaction ID: 17589891
Prestonsburg	KY	41653-9113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Highlands Regional Medical Center	Occupation VP/Patie	n nt Care Services	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Charles D Lovell, , Jr.	1		Date of Receipt
Mailing Address 101 Hospital Drive			10 05 2009
City	State	Zip Code	Transaction ID: 17589892
Princeton	KY	42445-0410	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Caldwell County Hospital	Occupation Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	1		1000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association Page 1	and Statements may not be sold or used by any person no the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Julian L. Shapero Mailing Address 217 East Chestnu		Date of Receipt
City	State Zip Code	Transaction ID: 17589896
Louisville FEC ID number of contributing federal political committee.	KY 40202-1886	Amount of Each Receipt this Period 250.00
Name of Employer Jewish Hospital & St. Mar- ys HealthCar Receipt For: Primary General Other (specify) ▼	Occupation Board Chair-Elect Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. David L Gray Mailing Address 913 North Dixie A	venue	Date of Receipt
City	Transaction ID: 17589898	
<u>Elizabethtown</u>	State Zip Code KY 42701-2599	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Hardin Memorial Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms Robin S Gray	l	Date of Receipt
Mailing Address 506 S. Maple St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17589901
Elizabethtown	KY 42701-2937	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Hardin Memorial Hospital	Occupation Homemaker/CEO Spouse	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	nal)	1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20/1/8 (check only one)		
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Hospital Association PAC		, , ,			
Full Name (Last, First, Middle Initial) Ms James R Morris, M.D.			Date of Receipt		
City Ashland	State KY	Zip Code 41101-7034	Transaction ID: 17589909 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer Our Lady of Bellefonte Hospital Receipt For: ☐ Primary ☐ General Other (specify) ▼		n /P / Medical Affairs e Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Mr Charles Black Mailing Address P O Box 1310			Date of Receipt		
City	10 05 2009				
Mount Vernon	State KY	Zip Code 40456-1310	Transaction ID: 17589915 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer Rockcastle Hospital and Respiratory Ca	Occupatio Chief Fin	n ancial Officer			
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General Other (specify) ▼	0 0	500.00			
Full Name (Last, First, Middle Initial) Mr. Stephen A Estes			Date of Receipt		
Mailing Address P O Box 1310			10 05 2009		
City	State	Zip Code	Transaction ID: 17589917		
Mount Vernon	KY	40456-1310	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer Rockcastle Hospital and Respiratory Ca	 	ecutive Officer			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional	<u> </u>		1250.00		

	FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 178 (check only one) X
C	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personante name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Jeff Smithern		Date of Receipt
	Mailing Address 145 Newcomb Avenue		10 05 2009
	City Mount Vernon	State Zip Code KY 40456-2728	Transaction ID: 17589919 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Rockcastle Hospital and Respiratory Ca	Occupation Director of Respiratory Care	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Thomas Sommers		Date of Receipt
	Mailing Address 2006 Irving Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: 17592883
	Beatrice	NE 68310-2265	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Beatrice Community Hospit- al and Health	Occupation Chief Executive Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	
. –	Full Name (Last, First, Middle Initial) Mr. Earl N Sheehy		Date of Receipt
	Mailing Address 268 W. Sloup Dr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: 17595386
	Wahoo FEC ID number of contributing federal political committee.	NE 68066-0185	Amount of Each Receipt this Period 350.00
	Name of Employer Saunders Medical Center	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)		950.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Full Name (Last, First, Middle Initial) Mr. Douglas G. Vang		Date of Receipt		
Mailing Address 502 Harwoood Drive City	State Zip Code	1 0 0 7 2 0 0 9 Transaction ID: 17595390		
Fargo	ND 58104-6276	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer MeritCare Health System	Occupation Senior Executive for Strategic Develop	-		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) Ms. Patricia Davis		Date of Receipt		
Mailing Address 4414 Manchester Cou	10 07 2009			
City	•			
Norman	OK 73072-3915	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer Oklahoma Hospital Associa- tion	Occupation Executive Vice President			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00			
Full Name (Last, First, Middle Initial) Ms. Cynthia Duncan		Date of Receipt		
Mailing Address 1115 East Jasmine		10 07 2009		
City	State Zip Code	Transaction ID: 17595401		
Frederick FEC ID number of contributing federal political committee.	OK 73542-4020	Amount of Each Receipt this Period 250.00		
Name of Employer Memorial Hospital and Phy- sician Group	Occupation Director, Human Resources			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	250.00			
SUBTOTAL of Receipts This Page (optional) .		1250.00		
TOTAL This Period (last page this line numbe	<u> </u>			

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 178 (check only one) X
Any or fo	information copied from such Reports and S r commercial purposes, other than using the	tatements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
1	IAME OF COMMITTEE (In Full) American Hospital Association PAC			
	ull Name (Last, First, Middle Initial) Ms. LaWanna Halstead, RN, MPH			Date of Receipt
N	Mailing Address 4000 Lincoln Boulevar	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C	ity	State	Zip Code	Transaction ID: 17595408
<u>C</u>	Oklahoma City	OK	73105-5207	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		250.00
N	lame of Employer Oklahoma Hospital Associa-	Occupation		
<u>ti</u>	on Receipt For:		ity & Clinical Initiatives	\dashv
n	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 279.00]
	ull Name (Last, First, Middle Initial)	1		Date of Receipt
_	Mailing Address 122 North 12th Street	1 0 0 7 2 0 0 9		
_	Sity	State	Zip Code	
	Frederick	OK	73542-5629	Transaction ID: 17595414 Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C	70072 0020	250.00
N N s	lame of Employer //emorial Hospital and Phy- ician Group	Occupation Nursing A	n Administrator	
R	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
	ull Name (Last, First, Middle Initial) Ms. Sheryl R. McLain, MS			Date of Receipt
N	Mailing Address 2301 Steeplechase Road			10 07 2009
C	ity	State	Zip Code	Transaction ID: 17595418
<u>E</u>	Edmond	OK	73034-5893	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		500.00
ti ti	lame of Employer bklahoma Hospital Associa- on		sident, Communications	
R	leceipt For: Primary General	Aggregate	Year-to-Date ▼ 500.00	1

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Full Name (Last, First, Middle Initial) Mr. James D Moore, , FACHE		Date of Receipt		
Mailing Address 1201 Health Center City	Parkway State Zip Code	1 0 0 7 2 0 0 9 Transaction ID: 17595420		
Yukon	OK 73099	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer INTEGRIS Canadian Valley Regional Hosp	Occupation President			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Mr. Rick Snyder		Date of Receipt		
Mailing Address 4000 Lincoln Boulev	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	,			
Oklahoma City	OK 73105-5207	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer Oklahoma Hospital Associa- tion	Occupation VP, Finance & Information Services			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) Ms. Gloria Thurman		Date of Receipt		
Mailing Address 319 East Josephine	Y	10 DD / YYYY 10 07 2009		
City	State Zip Code	Transaction ID: 17595425		
Frederick	OK 73542-2220	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer Memorial Hospital and Phy- sician Group	Occupation Administrator			
Receipt For: Primary General	Aggregate Year-to-Date ▼			
Other (specify)	250.00			
SUBTOTAL of Receipts This Page (optional)	1000.00		
TOTAL This Period (last page this line numl	<u> </u>			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 178 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	the name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Mary Winters Mailing Address 7750 N Chisholm F	IIII Rd		Date of Receipt
City Yukon	State OK	Zip Code 73099	Transaction ID: 17595432 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Oklahoma Hospital Association Receipt For: Primary General		ident Support Services Year-to-Date ▼ 250.00	250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Larry J Archbell Mailing Address 3100 East Fletcher City	Date of Receipt 10 08 2009 Transaction ID: 17597938		
Tampa FEC ID number of contributing federal political committee. Name of Employer University Community Hospital Receipt For: □ Primary □ General □ Other (specify) ▼		33613-4613 cutive Officer Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Timothy Barber Mailing Address 801 6th Street S	Date of Receipt 1 0 0 8 2 0 0 9		
City St. Petersburg FEC ID number of contributing federal political committee.	State FL	Zip Code 33701-4816	Transaction ID: 17597940 Amount of Each Receipt this Period 250.00
Name of Employer All Children's Hospital Receipt For: Primary General Other (specify)	Occupation Administr Aggregate		
SUBTOTAL of Receipts This Page (optional	al)	__	750.00

SCHEDULE A (FEC FO	rm 3X) Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 178 (check only one) X 11a
Any information copied from such F or for commercial purposes, other the NAME OF COMMITTEE (In Ful American Hospital Associa	•	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Full Name (Last, First, Middle In Mr. Clifford J. Bauer Mailing Address 401 North V	tial) Vest 131st Avenue	Date of Receipt
City Plantation	State Zip Code FL 33325	Transaction ID: 17597958 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer North Ridge Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle In Mr. Paul Belcher Mailing Address Rt. 15, Box	,	Date of Receipt 10 08 2009
City	State Zip Code	Transaction ID: 17597964
Tallahassee FEC ID number of contributing federal political committee.	FL 32311	Amount of Each Receipt this Period
Name of Employer Florida Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Senior Vice President Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle In Mr. Philip E. Boyce	tial)	Date of Receipt
Mailing Address 3563 Phillip Suite 101		10 08 7 2009
City Jacksonville	State Zip Code FL 32207-5663	Transaction ID: 17597974 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer Baptist Health	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	1
SUPTOTAL of Possints This Pag	e (optional)	1620.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 178 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Sue G Brody		Date of Receipt
Mailing Address 701 Sixth Street South		10 08 2009
City	State Zip Code	Transaction ID: 17598039
Saint Petersburg	FL 33701-4891	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer Bayfront Medical Center	Occupation President and Chief Executive Office	r
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1700.00	
Full Name (Last, First, Middle Initial) Mr. John R. Brownlow		Date of Receipt
Mailing Address 5608 Bear Lake Circle		10 08 2009
City	State Zip Code	Transaction ID: 17598040
Apopka	FL 32703-1916	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Florida Hospital	Occupation Vice President and Chief Operating O	Off
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Gary Carnes		Date of Receipt
Mailing Address 801 Sixth Street South		10 08 7 7 7 7 9
City	State Zip Code	Transaction ID: 17598046
Saint Petersburg	FL 33701-4816	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	610.00
Name of Employer All Children's Hospital	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 610.00	
SUBTOTAL of Receipts This Page (optional)		2060.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary	f the
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and address of any political co	y any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Paul Clark Mailing Address Munroe regional Me	edical Center	Date of Receipt
PO Box 6000 City Ocala FEC ID number of contributing	State Zip Code FL 34478	Transaction ID: 17598052 Amount of Each Receipt this Period
rec in number of contributing federal political committee. Name of Employer Munroe Regional Medical Center Receipt For: Primary General Other (specify)	Occupation President and Chief Executive Aggregate Year-to-Date	220.00 ve Officer
Full Name (Last, First, Middle Initial) Mr. Timothy W Cook Mailing Address P O Box 9400		Date of Receipt 100000000000000000000000000000000000
City	State Zip Code	Transaction ID: 17598056
Sebring FEC ID number of contributing federal political committee.	FL 33871-9400	Amount of Each Receipt this Period 500.00
Name of Employer Florida Hospital Heartland Medical Cen Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Aggregate Year-to-Date	ve Officer
Full Name (Last, First, Middle Initial) Ms. Martha DeCastro Mailing Address 1036 Alameda Driv	2	Date of Receipt
		10 08 2009
City Tallahassee	State Zip Code FL 32317-9577	Transaction ID: 17598058 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Florida Hospital Associat- ion Receipt For:	Occupation VP, Nursing Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼		00.00
SUBTOTAL of Receipts This Page (optional	·))	1320.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 178 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Robin DeLaVergne		Date of Receipt
Mailing Address 37 Aegean Avenue		M M / D D / Y Y Y Y Y 1 Y 1 1 0 0 8 2 0 0 9
City	State Zip Code	Transaction ID: 17598061
Tampa	FL 33606-3309	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tampa General Hospital	Occupation Vice President, Development	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)		Date of Pennint
Mr. Paul Dell Uomo Mailing Address 1210 South Old Dix	ie Highway	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17598062
Jupiter	FL 33458-7205	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	220.00
Name of Employer Jupiter Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Mr. Donald D Evans		Date of Receipt
Mailing Address 1395 South Pinellas	s Avenue	10 08 2009
City	State Zip Code	Transaction ID: 17598080
Tarpon Springs	FL 34689-3790	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Helen Ellis Memorial Hosp- ital	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persor ne name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Robert Galloway		Date of Receipt
Mailing Address 1350 South Hickory S	State Zip Code	10 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Melbourne	FL 32901-3278	Transaction ID: 17598085 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Holmes Regional Medical Center Receipt For: Primary Other (specify) ▼	Occupation Senior Vice President Finance and Ch Aggregate Year-to-Date ▼ 250.00	ie
Full Name (Last, First, Middle Initial) Mr Larry F Garrison		Date of Receipt
Mailing Address 6450 US Highway 1		10 08 2009
City	State Zip Code	Transaction ID: 17598087
Rockledge	FL 32955-5747	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Health First, Inc.	Occupation Chief Operating Officer	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Larry E. Hanan	<u> </u>	Date of Receipt
Mailing Address 4410 Endicott Place		10 08 YYYYY 2009
City	State Zip Code	Transaction ID: 17598110
<u>Tampa</u>	FL 33624-2621	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer University Community Heal- th	Occupation Corporate VP, Human Resources	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 178 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Marianne Hillegass Mailing Address 3561 Sanctuary Blvd. City Jacksonville FEC ID number of contributing	State Zip Code FL 32250-2571	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify)	Occupation Vice President, Operations Aggregate Year-to-Date 250.00]
Full Name (Last, First, Middle Initial) Mr. Lars Houmann Mailing Address 601 East Rollins Stree	it	Date of Receipt 1 0 0 8 2 0 0 9
City	State Zip Code	Transaction ID: 17598147
Orlando FEC ID number of contributing federal political committee.	FL 32803-1248	Amount of Each Receipt this Period 1360.00
Name of Employer Florida Hospital Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 1360.00	
Full Name (Last, First, Middle Initial) Ms. Sally Houston		Date of Receipt
Mailing Address 6528 Surfside Blvd.		10 08 2009
City Apollo Beach	State Zip Code FL 33572-3008	Transaction ID: 17598152
FEC ID number of contributing federal political committee.	C 33372-3006	Amount of Each Receipt this Period 250.00
Name of Employer Tampa General Hospital	Occupation Chief Medical Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	1	1860.00

City State Zip Code FEC ID number of contributing federal political committee. Name of Employer Central Florida Regional Hospital Receipt For: Primary General Other (specify) ▼ PEC ID number of contributing federal Political committee. Primary General Other (specify) ▼ PEC ID number of contributing federal Political committee. Pull Name (Last, First, Middle Initial) Mr. Jeffery Hurst Mailing Address 533 Northridge Drive City State Zip Code FL 32714-1831 FEC ID number of contributing federal political committee. PEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Primary General Other (specify) ▼ Primary General Other (specify) ▼ Poate of Receipt Transaction ID: 17598154 Amount of Each Receipt this FL 32714-1831 Date of Receipt Transaction ID: 17598154 Amount of Each Receipt this FL 300.00 Date of Receipt Transaction ID: 17598155 Amount of Each Receipt This FL 32223-6683) 11b	FOR LINE NUMBE (check only one) X 11a 11b 13 14	Use separate schedule(s) for each category of the Detailed Summary Page	3X)	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	
A. Least, First, Middle Initial) Least Dixie Ave City State Zip Code FEC ID number of contributing federal political committee. Name of Employer Central Florida Regional Hospital Receipt For: Primary General Other (specify) ▼ State Zip Code President/CEO Aggregate Year-to-Date ▼ 10	of soliciting contributions is from such committee.	erson for the purpose of se to solicit contributions fr	y not be sold or used by any pers dress of any political committee to	s and Statements may sing the name and add	for commercial purposes, other than using the	An or
ALL Lee Huntley Mailing Address 600 East Dixie Ave City State Zip Code FEC ID number of contributing federal political committee. Name of Employer Central Florida Regional Hospital Altamonte Springs FL 32714-1831 FEC ID number of contributing federal political committee. Name of Employer Central Florida Regional Hospital Altamonte Springs FL 32714-1831 FEC ID number of contributing federal political committee. Name of Employer Central Florida Regional Hospital Altamonte Springs FL 32714-1831 FEC ID number of contributing federal political committee. Name of Employer Coccupation Vice President Receipt For: Primary General Occupation Vice President Receipt For: Aggregate Year-to-Date ▼ Date of Receipt For: Funda Hospital Altamonte Florida Hospital Florida Fl				PAC	•	
City State Zip Code FEC ID number of contributing federal political committee. Name of Employer City Altamonte Springs FEC ID number of contributing federal political committee. Name of Employer Central Florida Regional Hospital Receipt For: Primary General Other (specify) ▼	•	·			Lee Huntley	٨.
Leesburg FL 34748-5925 FEC ID number of contributing federal political committee. C	08 2009	1 0				
FEC ID number of contributing federal political committee. Name of Employer Central Florida Regional Hospital Hospital Hospital President/CEO Receipt For: Primary General Other (specify) ▼			•			
Hospital Receipt For: Primary General Question Question	250.00	Amount of Each			FEC ID number of contributing	
Receipt For: Primary					Name of Employer Central Florida Regional Hospital	
Date of Receipt Mailing Address 533 Northridge Drive City State Zip Code Altamonte Springs FL 32714-1831 FEC ID number of contributing federal political committee. Name of Employer Florida Hospital-Altamonte Primary General Other (specify) ▼		· .		Aggregate	Receipt For: Primary General	
City State Zip Code Altamonte Springs FL 32714-1831 FEC ID number of contributing federal political committee. Name of Employer Florida Hospital-Altamonte Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Melanie Husk Mailing Address 10734 Waverley Bluff Way City State Zip Code Jacksonville FL 32223-6683 FEC ID number of contributing federal political committee. Date of Receipt M M M / D D D / Y Y D D D / Y Y D D D M D D D D D D D D D D D D D D	eipt	Date of Receipt				 3.
Altamonte Springs				Orive	Mailing Address 533 Northridge Drive	
FEC ID number of contributing federal political committee. Name of Employer Florida Hospital-Altamonte Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Melanie Husk Mailing Address 10734 Waverley Bluff Way City State Zip Code Jacksonville FEC ID number of contributing federal political committee. Name of Employer Baptist Health Receipt For: Primary General Occupation V/P Marketing Receipt For: Aggregate Year-to-Date ▼ Transaction ID: 17598155 Amount of Each Receipt this F Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼			•		•	
Receipt For: Name of Employer Florida Hospital-Altamonte	ach Receipt this Period	Amount of Each	32714-1831	FL		
Florida Hospital-Altamonte Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Melanie Husk Mailing Address 10734 Waverley Bluff Way City State Zip Code Jacksonville FEC ID number of contributing federal political committee. Name of Employer Baptist Health Receipt For: Primary General Vice President Aggregate Year-to-Date ▼ Date of Receipt Mam M / D D D / Y Y Y Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z	500.00				federal political committee.	
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Melanie Husk Mailing Address 10734 Waverley Bluff Way City State Zip Code Jacksonville FL 32223-6683 FEC ID number of contributing federal political committee. Name of Employer Baptist Health Name of Employer Baptist Health Receipt For: Primary General Date of Receipt Transaction ID: 17598155 Amount of Each Receipt this F Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼				· · · · · · · · · · · · · · · · · · ·	Name of Employer Florida Hospital-Altamonte	
Tull Name (Last, First, Middle Initial) Melanie Husk Mailing Address 10734 Waverley Bluff Way City Jacksonville FEC ID number of contributing federal political committee. Name of Employer Baptist Health Receipt For: Primary General Date of Receipt Transaction ID: 17598155 Amount of Each Receipt this F			e Year-to-Date	Aggregate		
Melanie Husk Mailing Address 10734 Waverley Bluff Way City State Zip Code Jacksonville FL 32223-6683 FEC ID number of contributing federal political committee. Name of Employer Baptist Health Receipt For: Primary General Date of Receipt Transaction ID: 17598155 Amount of Each Receipt this F C Aggregate Year-to-Date ▼			500.00			
City State Zip Code Jacksonville FL 32223-6683 FEC ID number of contributing federal political committee. Name of Employer Baptist Health Receipt For: Primary General Aggregate Year-to-Date P	eipt	Date of Receipt		I	Melanie Husk	
Jacksonville FL 32223-6683 Amount of Each Receipt this F FEC ID number of contributing federal political committee. C 2 Amount of Each Receipt this F C Occupation VP Marketing Receipt For: Primary General Aggregate Year-to-Date OCCUPATION Aggregat				Bluff Way	Mailing Address 10734 Waverley Bluf	
FEC ID number of contributing federal political committee. Name of Employer Baptist Health Occupation VP Marketing Receipt For: Primary General Aggregate Year-to-Date			·		•	
Receipt For: Primary General Aggregate Year-to-Date	each Receipt this Period 250.00	Amount of Each	32223-6683		FEC ID number of contributing	
Receipt For: Primary General Aggregate Year-to-Date ▼					Name of Employer Baptist Health	
1			e Year-to-Date ▼		Primary General	
SUBTOTAL of Receipts This Page (optional)	1000.00			onal)	UBTOTAL of Receipts This Page (optional)	s

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for comn	ation copied from such Reports and St nercial purposes, other than using the D DF COMMITTEE (In Full) can Hospital Association PAC	atements maname and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Mr. Rich Mailing A City Winde	ne (Last, First, Middle Initial) ard M Irwin, , Jr. Address 501 Lake Street rmere number of contributing political committee.	State FL	Zip Code 34786	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt Pr	f Employer Central For: imary General ther (specify)		n t and Chief Executive Officer e Year-to-Date ▼ 500.00	·
Ms. Sally	ne (Last, First, Middle Initial) y Jackson Address 8250 College Parkway Suite 103	State FL	Zip Code 33919-5199	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID federal properties for the second sec	number of contributing political committee. f Employer morial Health System	C Occupation		250.00
Dr. Dona	ne (Last, First, Middle Initial) ald L Jernigan, , Ph.D. Address 111 North Orlando Avel	nue		Date of Receipt 1 0 0 8 2 0 0 9
	Park number of contributing political committee.	State FL	Zip Code 32789-3675	Transaction ID: 17598159 Amount of Each Receipt this Period 1000.00
Name of Adventis Sunbelt Receipt	f Employer st Health System Health		n t and Chief Executive Officer e Year-to-Date ▼ 1000.00	
SUBTOTA	AL of Receipts This Page (optional)		>	1750.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Warren E Jones Mailing Address 1300 Miccosukee Roa City Tallahassee FEC ID number of contributing federal political committee.	State Zip Code FL 32308-5054	Date of Receipt M M C D D C 2009 Transaction ID: 17598162 Amount of Each Receipt this Period 1000.00
Name of Employer Tallahassee Memorial Heal- thCare Receipt For: Primary General Other (specify) ▼	Occupation Vice President and Chief Communication Aggregate Year-to-Date 1000.00	ation
Full Name (Last, First, Middle Initial) Mr Jay Kuhns Mailing Address 6437 Alcester Drive		Date of Receipt 1 0 0 8 2 0 0 9
City	State Zip Code	Transaction ID: 17598166
New Port Richey FEC ID number of contributing federal political committee.	FL 34655-3708	Amount of Each Receipt this Period 250.00
Name of Employer All Children's Hospital	Occupation VP Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Keith Lundquist		Date of Receipt
Mailing Address 1600 Sunny Brook La	ne	10 08 2009
City	State Zip Code	Transaction ID: 17598175
Palm Bay	FL 32905-6527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Health First, Inc.	Occupation VP, Marketing & Community Relation	ns
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	1	

Any information copied from such Reports and Sta or for commercial purposes, other than using the normal NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Lorraine L. Lutton Mailing Address 6508 North River Boulever City Tampa FEC ID number of contributing federal political committee. Name of Employer St. Joseph's Hospital Receipt For: Primary General Other (specify)	ame and address of any political committee to s	Date of Receipt Date of Receipt Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ms. Lorraine L. Lutton Mailing Address 6508 North River Boulev City Tampa FEC ID number of contributing federal political committee. Name of Employer St. Joseph's Hospital Receipt For: Primary General Other (specify)	State Zip Code FL 33604-6028 C Occupation Chief Operating Officer Aggregate Year-to-Date 500.00	Transaction ID: 17598176 Amount of Each Receipt this Period
Tampa FEC ID number of contributing federal political committee. Name of Employer St. Joseph's Hospital Receipt For: Primary General Other (specify) ▼	FL 33604-6028 C Occupation Chief Operating Officer Aggregate Year-to-Date ▼ 500.00	Transaction ID: 17598176 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer St. Joseph's Hospital Receipt For: Primary General Other (specify)	C Occupation Chief Operating Officer Aggregate Year-to-Date ▼	
Receipt For: Primary General Other (specify)	Chief Operating Officer Aggregate Year-to-Date ▼ 500.00	<u>-</u> -
Full Name (Last, First, Middle Initial) Mr. Lloyd Maliner Mailing Address 11113 Blackhawk Road		Date of Receipt 1 0 0 8 2 0 0 9
City	State Zip Code	Transaction ID: 17598177
Davie FEC ID number of contributing federal political committee.	FL 33328-2107	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Healthcare System	Occupation Administrator	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Stephen Mason		Date of Receipt
Mailing Address 3909 Snapper Pointe Dr	ive	1 0 0 8 2 0 0 9
City	State Zip Code	Transaction ID: 17598178
Tampa FEC ID number of contributing federal political committee.	FL 33611-1030	Amount of Each Receipt this Period 1000.00
Name of Employer BayCare Health System	Occupation President & CEO	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	>	1750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 178 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Jean Mayer Mailing Address 2408 W. Watrous Ave City Tampa FEC ID number of contributing	State Zip Code FL 33629-5343	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
rederal political committee. Name of Employer Tampa General Hospital Receipt For: Primary General Other (specify)	Occupation Vice President for Strategic Services Aggregate Year-to-Date 250.00	250.00
Full Name (Last, First, Middle Initial) Mr. Michael D Means Mailing Address 6450 US Highway 1 City	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Rockledge FEC ID number of contributing federal political committee. Name of Employer	FL 32955-5747 C Occupation	Amount of Each Receipt this Period 500.00
Receipt For: Primary Other (specify)	President and Chief Executive Officer Aggregate Year-to-Date 500.00	<u>r </u>
Full Name (Last, First, Middle Initial) Mr. George Mikitarian, , Jr. Mailing Address 951 North Washington	n Avenue	Date of Receipt
City Titusville	State Zip Code FL 32796-2163	Transaction ID: 17598187 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Parrish Medical Center	Occupation	250.00
Parrish Medical Center Receipt For: Primary General Other (specify)	Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	
		1000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 178 (check only one) X 11a
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr James Mondello Mailing Address 1204 NW Winters Cre City Palm City FEC ID number of contributing	eek Rd State Zip Code FL 34990-8086	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Martin Memorial Health Systems Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Trustee Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Kathleen Murray Mailing Address 13286 Stone Pond Dri		Date of Receipt 10 08 7 2009
City	State Zip Code FL 32224-1622	Transaction ID: 17598195
Jacksonville FEC ID number of contributing federal political committee. Name of Employer	FL 32224-1622 C Occupation	Amount of Each Receipt this Period 250.00
Baptist Medical Center Receipt For: Primary General Other (specify) ▼	Administrator Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Richard Mutarelli	1	Date of Receipt
Mailing Address P O Box 6000		10 08 7 4 4 4
City <u>Ocala</u>	State Zip Code FL 34478-6000	Transaction ID: 17598196 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Munroe Regional Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional)	1	750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	;		
Full Name (Last, First, Middle Initial) Ms. Deana L. Nelson			Date of Receipt
Mailing Address Post Office Box 128	9		10 08 2009
City Tampa	State FL	Zip Code 33601-1289	Transaction ID: 17598197
FEC ID number of contributing federal political committee.	C	33001-1269	Amount of Each Receipt this Period 500.00
Name of Employer Tampa General Hospital	Occupation Sr. Vice	n President, Patient Services	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr James Orr			Date of Receipt
Mailing Address 2968 SE Southview	Dr		10 08 2009
City Stuart	State FL	Zip Code 34996-4944	Transaction ID: 17598219
FEC ID number of contributing federal political committee.	C	04330-4344	Amount of Each Receipt this Period 500.00
Name of Employer Martin Memorial Health Sy-	Occupation Trustee	n	
stems Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. David Ottati			Date of Receipt
Mailing Address 60 Memorial Medica	al Parkway		10 08 2009
City Palm Coast	State FL	Zip Code 32164-5980	Transaction ID: 17598220
FEC ID number of contributing federal political committee.	C	32104-0900	Amount of Each Receipt this Period 250.00
Name of Employer Florida Hospital-Flagler	Occupation Administ		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		1250.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 178 (check only one) X
r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Terry R. Owen		Date of Receipt
Mailing Address 2520 Fox Squirrel Co	urt	10 08 YYYY 2009
City	State Zip Code	Transaction ID: 17598221
<u>Apopka</u>	FL 32712-2513	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Florida Hospital	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Judith Ploszek	1	Date of Receipt
Mailing Address 2863 Bayshore Trails	Drive	10 08 2009
City	State Zip Code	Transaction ID: 17598230
<u>Tampa</u>	FL 33611-5525	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tampa General Hospital	Occupation Vice President Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Cal Popovich	I	Date of Receipt
Mailing Address 801 Sixth Street Sout	h	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17598231
Saint Petersburg	FL 33701-4816	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer All Children's Hospital	Occupation Vice President Information Technology	gy
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 178 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Diane S. Raines			Date of Receipt
Mailing Address 4090 San Jose Bou	State	Zip Code	1 0 0 8 2 0 0 9 Transaction ID: 17598236
Jacksonville	FL	32207-6063	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Baptist Health	Occupation Senior Vi	n ice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Dr. C. B. Rebsamen, MD Mailing Address 18201 Chesapeake	· Ct.		Date of Receipt
			10 08 2009
City	State	Zip Code	Transaction ID: 17598237
Fort Myers	FL	33908-4676	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Lee Memorial Hospital		dical Director	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr Mike Robertson	•		Date of Receipt
Mailing Address P. O. Box 6000			10 08 7 2009
City	State	Zip Code	Transaction ID: 17598445
<u>Ocala</u>	FL	34478-6000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		210.00
Name of Employer Munroe Regional Medical Center		egic Planning	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optiona	ıl)		710.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 178 (check only one) X 11a
A	for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Mr. Mark E. Robitaille		Date of Receipt
	Mailing Address 53 S. River Road		10 08 2009
	City Stuart	State Zip Code FL 34996-6723	Transaction ID: 17598446 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Martin Memorial Health Sy- stems	Occupation President & CEO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Chris Roederer		Date of Receipt
	Mailing Address 615 Riviera Dunes Wa	10 08 YYYY 2009	
	City	Transaction ID: 17598447	
	Palmetto	FL 34221-7145	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Tampa General Hospital	Occupation Vice President for Human Resources	s
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
_	Full Name (Last, First, Middle Initial) Mr. Patrick A Schlenker		Date of Receipt
	Mailing Address P O Box 889		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 17598522
	Chipley FEC ID number of contributing federal political committee.	FL 32428-0889	Amount of Each Receipt this Period 250.00
	Name of Employer Northwest Florida Communi- ty Hospital	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Γ			1000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate scheduler for each category of the Detailed Summary Page	(Crieck only one)
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any e name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Mike Schultz Mailing Address 1437 Langham Terrac City Lake Mary	State Zip Code FL 32746-1967	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Receipt For: Primary General Other (specify) ▼	C Occupation CEO Florida Region Aggregate Year-to-Date ▼	500.00
Full Name (Last, First, Middle Initial) Ms Kathi Sengin Mailing Address 502 South Fremont Av	/e, Apt. 3 State Zip Code	Date of Receipt M
<u>Tampa</u>	FL 33606-2068	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tampa General Hospital	Occupation Senior VP/ CNO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.0	10
Full Name (Last, First, Middle Initial) Mr. Jerry Senne		Date of Receipt
Mailing Address 1350 S. Hickory St.		10 08 2009
City	State Zip Code	Transaction ID: 17598940
Melbourne 550 ID	FL 32901-3224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Holmes Regional Medical Center Receipt For:	Occupation President Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.0	0
		1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43/1/8 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>	· · ·	
Full Name (Last, First, Middle Initial) Mr. Terry Shaw			Date of Receipt
Mailing Address 111 North Orlando	Avenue		10 08 2009
City Fort Worth	State FL	Zip Code 32789-3675	Transaction ID: 17598941 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Adventist Health System Sunbelt Health Receipt For: Primary General Other (specify)	1	n ancial Officer Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Steven Short Mailing Address P O Box 1289			Date of Receipt
City	State	Zip Code	10 08 2009
Tampa	FL	33601-1289	Transaction ID: 17599130 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Tampa General Hospital	Occupation Executive	n e VP, Finance and Administr	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Claudia Sokolowski			Date of Receipt
Mailing Address 801 6th Street S			10 08 2009
City St. Petersburg	State FL	Zip Code 33701-4816	Transaction ID: 17599134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00701-4010	500.00
Name of Employer All Children's Hospital	Occupation Administ		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (options	al)		1500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate s for each categ Detailed Sumr	ory of the Clieck only one)
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or us name and address of any politic	ed by any person for the purpose of soliciting contributions al committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Eddie Soler Mailing Address 250 Kentucky blue Cit City Apopka FEC ID number of contributing federal political committee. Name of Employer Florida Hospital	State Zip Code FL 32712-4767 C Occupation CFO	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
Full Name (Last, First, Middle Initial) Daniel Sweeney Mailing Address 1706 Huntington Cour	t	Date of Receipt M M D D Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17599159
Safety Harbor FEC ID number of contributing federal political committee.	FL 34695-5635	Amount of Each Receipt this Period 250.00
Name of Employer BayCare Health System	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
Full Name (Last, First, Middle Initial) Mr. Daryl Tol		Date of Receipt
Mailing Address 701 West Plymouth A	venue	10 08 2009
City	State Zip Code	Transaction ID: 17599163
Deland	FL 32720-3236	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer Florida Hospital - De Land	Occupation President and Chief Exe	cutive Officer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	300.00
SUBTOTAL of Receipts This Page (optional) .		800.008

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 178 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr Robert Weissman Mailing Address 1212 NW Winters	creek Rd	Date of Receipt
City Palm City FEC ID number of contributing	State Zip Code FL 34990-8086	Transaction ID: 17599169 Amount of Each Receipt this Period 250.00
Name of Employer Martin Memorial Health Systems Receipt For: Primary General Other (specify)	Occupation Trustee Aggregate Year-to-Date 250.00]
Full Name (Last, First, Middle Initial) Ms. Terri Wentz Mailing Address 1210 South Old Di		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Jupiter FEC ID number of contributing federal political committee.	State Zip Code FL 33458-7299	Transaction ID: 17599170 Amount of Each Receipt this Period 500.00
Name of Employer Jupiter Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr Wayne Wray Mailing Address 350 2nd St. North	#5	Date of Receipt
City Saint Petersburg FEC ID number of contributing federal political committee.	State Zip Code FL 33701-2984 C	Transaction ID: 17599175 Amount of Each Receipt this Period 250.00
Name of Employer All Children's Hospital Receipt For: Primary General Other (specify) ▼	Occupation Compliance Officer Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (options	al)	1000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each ca	ate schedule(s) tegory of the ummary Page	FOR LINE NUMBER: PAGE 46 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or e name and address of any po	used by any persor olitical committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC			
A.	Full Name (Last, First, Middle Initial) Mr. Roy Wright, , FACHE Mailing Address P O Box 320069			Date of Receipt
		State Zip Code		10 08 2009
	City Cocoa Beach	FL 32932-00	069	Transaction ID: 17599176 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Cape Canaveral Hospital	Occupation President and Chief E	Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	500.00	
— В.	Full Name (Last, First, Middle Initial) Mr Frank Zappala	1		Date of Receipt
	Mailing Address 7017 SE Harbor Circl	10 08 2009		
	City	State Zip Code		Transaction ID: 17599178
	Stuart FEC ID number of contributing federal political committee.	FL 34996-19	323	Amount of Each Receipt this Period 1000.00
	Name of Employer Martin Memorial Hospital South	Occupation Trustee		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	1000.00	
_ c.	Full Name (Last, First, Middle Initial) Daria Martin			Date of Receipt
	Mailing Address 995 Ravine Road Nor	h		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code		Transaction ID: 17599803
	Switzerland FEC ID number of contributing federal political committee.	FL 32259-90	034	Amount of Each Receipt this Period 350.00
	Name of Employer Baptist Medical Center	Occupation Auxilian		1
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	350.00	
	SUBTOTAL of Receipts This Page (optional) .	1		1850.00
	TOTAL This Period (last page this line numbe		<u>·</u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A OI	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Mr. Thomas Gessel Mailing Address 1850 Bluegrass Avenu			Date of Receipt
				10 09 2009
	City Louisville	State KY	Zip Code 40215-1199	Transaction ID: 17599820 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10210 1100	1000.00
	Name of Employer Sts. Mary & Elizabeth Hos- pital	Occupatio Chief Ex	n ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Chris Carle			Date of Receipt
	Mailing Address 238 Barnes Road	10 09 2009		
	City	State KY	Zip Code	Transaction ID: 17599830
	Williamstown FEC ID number of contributing federal political committee.	C	41097-9460	Amount of Each Receipt this Period
	Name of Employer St. Elizabeth Medical Cen- ter-Grant Cou	Occupatio Administ		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Mr. Herb B. Kuhn			Date of Receipt
	Mailing Address 5310 Saddlebrooke La	ane		10 12 2009
	City Lohman	State MO	Zip Code	Transaction ID: 17599836
	FEC ID number of contributing federal political committee.	C	65053-9353	Amount of Each Receipt this Period 1000.00
	Name of Employer Missouri Hospital Associa- tion	Occupatio Presiden	n t and CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Г		I		3000.00

ITE	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for	nformation copied from such Reports and State commercial purposes, other than using the I AME OF COMMITTEE (In Full) merican Hospital Association PAC	atements ma name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. MM Ci H FI fe Ni B H	ull Name (Last, First, Middle Initial) r. Ben Vincent, , FACHE ailing Address 149 Marple Drive ity leaters EC ID number of contributing deral political committee. ame of Employer raxton County Memorial ospital eceipt For: Primary General Other (specify)	State WV C Occupatio CEO Aggregate	Zip Code 26627-9603 n e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
B. DMM Ci Si Fi fe Ni	ull Name (Last, First, Middle Initial) r. Glenn Crotty, , Jr., M.D ailing Address 36E Coventry Road ity outh Charleston EC ID number of contributing deral political committee. ame of Employer harleston Area Medical enter eccipt For: Primary General Other (specify) ▼		Zip Code 25309 n e Vice President and Chief Cory Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. MM Ci Ci Fi fe Ni	ull Name (Last, First, Middle Initial) r Larry C Hudson ailing Address 5035 Bennington Drive ity iross Lanes EC ID number of contributing deral political committee. ame of Employer harleston Area Medical enter eccipt For: Primary General Other (specify)	State WV C Occupatio Executive	Zip Code 25313-2055 n e Vice President and Chief F e Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUB	STOTAL of Receipts This Page (optional)			750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 178 (check only one) X
A or	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Mr. David L Ramsey Mailing Address 20 Wildacre Road		Date of Receipt
	City	State Zip Code	1 0 0 9 2 0 0 9 Transaction ID: 17599949
	<u>Charleston</u>	WV 25314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Charleston Area Medical Center	Occupation President and Chief Executive Office	r
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr Robert D Whitler		Date of Receipt
	Mailing Address 5 Evergreen Drive		10 09 7 2009
	City	State Zip Code	Transaction ID: 17599951
	Elkview FEC ID number of contributing federal political committee.	WV 25071-9314	Amount of Each Receipt this Period 500.00
	Name of Employer Charleston Area Medical Center	Occupation Vice President Government and Com	nmunit
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
:.	Full Name (Last, First, Middle Initial) Mr. Mark Doak		Date of Receipt
	Mailing Address Rt. 1 Box 180		10 09 2009
	City	State Zip Code	Transaction ID: 17599953
	Beverly FEC ID number of contributing federal political committee.	WV 26253-9753	Amount of Each Receipt this Period 250.00
	Name of Employer Davis Memorial Hospital	Occupation President and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		<u> </u>	1250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
A.	Full Name (Last, First, Middle Initial) Mr. George Perich Mailing Address 905 Riverview Drive		Date of Receipt
		7: 0 1	10 09 2009
	City Fairmont	State Zip Code WV 26554-1435	Transaction ID: 17599980 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Fairmont General Hospital	Occupation Vice President Human Resources an	— d Leg
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Todd Campbell		Date of Receipt
	Mailing Address 125 Water Side Circle		10 09 2009
	City Winfield	State Zip Code WV 25213-9551	Transaction ID: 17599997
	FEC ID number of contributing federal political committee.	WV 25213-9551	Amount of Each Receipt this Period 500.00
	Name of Employer St. Mary's Medical Center	Occupation Senior VP & COO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00]
с. С.	Full Name (Last, First, Middle Initial) Tyson Smith		Date of Receipt
	Mailing Address 14 Fairway Drive		10 09 2009
	City	State Zip Code	Transaction ID: 17600004
	Huntington FEC ID number of contributing federal political committee.	WV 25705-2149	Amount of Each Receipt this Period 500.00
	Name of Employer St. Mary's Medical Center	Occupation Vice President, Medical Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	_	1250.00
t	TOTAL This Period (last page this line number	· · · · · · · · · · · · · · · · · · ·	

or for commercial purposes, other NAME OF COMMITTEE (In F American Hospital Associ Full Name (Last, First, Middle I Ms. Evelyn Letnaunchyn Mailing Address 225 Ariel I City Charleston	than using the name and addull) ation PAC nitial) Heights State WV	not be sold or used by any pers ress of any political committee to Zip Code	on for the purpose of soliciting contributions o solicit contributions from such committee. Date of Receipt
American Hospital Associ Full Name (Last, First, Middle I Ms. Evelyn Letnaunchyn Mailing Address 225 Ariel I City Charleston	ation PAC nitial) Heights State WV	Zip Code	M M / D D / Y Y Y Y
Ms. Evelyn Letnaunchyn Mailing Address 225 Ariel I City Charleston	Heights State WV	Zip Code	M M / D D / Y Y Y Y
City Charleston	State WV	Zip Code	
Charleston	WV	Zip Code	10 09 2009
		25311-1143	Transaction ID: 17600005
FEC ID number of contributing federal political committee.	C	25511-1145	Amount of Each Receipt this Period 500.00
Name of Employer n/a	Occupation Homemal		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle I Dr. John R Brennan, , M.D. Mailing Address 3 Castle C	,		Date of Receipt
	ouit		10 09 2009
City	State	Zip Code	Transaction ID: 17600010
Randolph FEC ID number of contributing federal political committee.	NJ C	07869-2022	Amount of Each Receipt this Period 500.00
Name of Employer Saint Barnabas Health Care System	Occupation Executive		
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle I Mr. Dale A. Creamer	nitial)		Date of Receipt
Mailing Address 101 East I	Broadway		10 09 7 9 2009
City	State	Zip Code	Transaction ID: 17600014
Hackensack FEC ID number of contributing federal political committee.	NJ C	07601-6851	Amount of Each Receipt this Period 500.00
Name of Employer Holy Name Hospital	Occupation Trustee		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Pa	ge (optional)		1500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate for each cate Detailed Sum	schedule(s) gory of the	FOR LINE NUMBER: PAGE 52 / 178 (check only one) X
A or	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or use name and address of any politi	sed by any person for cal committee to so	or the purpose of soliciting contributions licit contributions from such committee.
	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. John E. Graydon			Date of Receipt
	Mailing Address 93 Matlack Drive			10 09 2009
	City Voorhees	State Zip Code NJ 08043-4723	,	Transaction ID: 17600016
	FEC ID number of contributing federal political committee.	C 00043-4720		Amount of Each Receipt this Period 500.00
	Name of Employer Virtua Health	Occupation Vice President		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	500.00	
	Full Name (Last, First, Middle Initial) Mr. Leslie D. Hirsch			Date of Receipt
	Mailing Address 28 Macckenzie Lane North			10 09 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code		Transaction ID: 17600018
	<u>Denville</u>	NJ 07834-3724	1	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Saint Clare's Hospital	Occupation President & CEO		
	Receipt For:	Aggregate Year-to-Date ▼	,	
	Primary General Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) Mr. Stephen K. Jones			Date of Receipt
	Mailing Address 98 Providence Boulavard			M M / D D / Y Y Y Y Y Y 1 1 0 0 9 2 0 0 9
	City	State Zip Code		Transaction ID: 17600020
	Kendall Park FEC ID number of contributing	NJ 08824	•	Amount of Each Receipt this Period
	federal political committee.	C		1250.00
	Name of Employer Robert Wood Johnson University Hospita	Occupation President & CEO		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	1250.00	
	SUBTOTAL of Receipts This Page (optional).	•		2250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Barry Ostrowsky		Date of Receipt
	Mailing Address 448 Harding Drive		10 09 7 2009
	City South Orange	State Zip Code NJ 07079-1319	Transaction ID: 17600021
	FEC ID number of contributing federal political committee.	C 07073-1319	Amount of Each Receipt this Period 500.00
	Name of Employer Saint Barnabas Health Care System	Occupation Executive Vice President and Genera	al ¢
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
_ В.	Full Name (Last, First, Middle Initial) Steven A Rose		Date of Receipt
	Mailing Address 17861 Meadow Drive		10 09 2009
	City	State Zip Code	Transaction ID: 17602837
	Bridgeville	DE 19933-3978	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Nanticoke Memorial Hospit- al	Occupation Chief Nursing Officer& COO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
_ C.	Full Name (Last, First, Middle Initial) Dr. Robert J Laskowski, , M.D.		Date of Receipt
	Mailing Address P O Box 1668		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 17602841
	Wilmington FEC ID number of contributing federal political committee.	DE 19899-1668	Amount of Each Receipt this Period 1000.00
	Name of Employer Christiana Care Health Sy- stem	Occupation President and Chief Executive Office	er
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)		1850.00
ı	TOTAL This Period (last page this line number		

nation copied from such Reports and mercial purposes, other than using the OF COMMITTEE (In Full) (can Hospital Association PAC) (me (Last, First, Middle Initial) (liam T Richardson) (Address Drawer 747) O number of contributing political committee. of Employer gional Medical Centributing (General Other (specify))	Statements may not be sold or used by any person e name and address of any political committee to see name and address of address of any political committee to see name and address of address	Date of Receipt Date of Receipt
can Hospital Association PAC Ime (Last, First, Middle Initial) liam T Richardson Address Drawer 747 D number of contributing political committee. of Employer gional Medical Centributing Centributing Political Centributing Centributing Political Centributing Ce	GA 31793-0747 C Occupation President and Chief Executive Officer Aggregate Year-to-Date	Transaction ID: 17605287 Amount of Each Receipt this Period
Address Drawer 747 D number of contributing political committee. of Employer gional Medical Centributing General	GA 31793-0747 C Occupation President and Chief Executive Officer Aggregate Year-to-Date	Transaction ID: 17605287 Amount of Each Receipt this Period
o number of contributing political committee. of Employer gional Medical Centrological For: Orimary General	GA 31793-0747 C Occupation President and Chief Executive Officer Aggregate Year-to-Date	1 0 0 9 2 0 0 9 Transaction ID: 17605287 Amount of Each Receipt this Period
o number of contributing political committee. of Employer gional Medical Centrology t For: Orimary General	GA 31793-0747 C Occupation President and Chief Executive Officer Aggregate Year-to-Date	Amount of Each Receipt this Period
political committee. of Employer gional Medical Cen- t For: Orimary General	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼	
t For: Primary General	President and Chief Executive Officer Aggregate Year-to-Date ▼	
Primary General		
	230.00	
ıme (Last, First, Middle Initial) n R Hicks		Date of Receipt
Address 1600 Prairie Center P	'arkway	10 12 7 2009
	State Zip Code	Transaction ID: 17605600
on	CO 80601-4006	Amount of Each Receipt this Period
number of contributing political committee.	C	250.00
of Employer Valley Medical Cen-	Occupation President and Chief Executive Officer	
t For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 250.00	
me (Last, First, Middle Initial) hael L. Fordyce		Date of Receipt
Address 1999 Broadway Suite 2605		10 12 2009
	State Zip Code	Transaction ID: 17605645
er	CO 80202-3025	Amount of Each Receipt this Period
political committee.	C	250.00
of Employer Hospital	Occupation CEO	
t For:	Aggregate Year-to-Date ▼	
rımary General	250.00	
Other (specify) ▼	1	
	For: rimary General ther (specify) me (Last, First, Middle Initial) nael L. Fordyce Address 1999 Broadway Suite 2605 r number of contributing political committee. of Employer lospital For: rimary General	For: rimary General ther (specify) me (Last, First, Middle Initial) nael L. Fordyce Address 1999 Broadway Suite 2605 State Zip Code CO 80202-3025 number of contributing political committee. of Employer lospital General General General Aggregate Year-to-Date Aggregate Year-to-Date

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 178 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Mary-Anne Ponti		Date of Receipt
	Mailing Address 3070 Morford Road		10 13 2009
	City Petoskey	State Zip Code MI 49770-9234	Transaction ID: 17606040 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Northern Michigan Regional Hospital	Occupation Chief Nurse Executive	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Ms. Mary Ann Hewston		Date of Receipt
	Mailing Address 10501 State Hwy 285		10 13 2009
	City	State Zip Code	Transaction ID: 17606041
	Conneaut Lake FEC ID number of contributing federal political committee.	PA 16316	Amount of Each Receipt this Period 350.00
	Name of Employer Meadville Medical Center	Occupation Director, Rehabilitative Services	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
_	Full Name (Last, First, Middle Initial) Michael Curren		Date of Receipt
	Mailing Address 223 Franklin St.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Reading	State Zip Code MA 01867-1030	Transaction ID: 17606047
	FEC ID number of contributing federal political committee.	MA 01867-1030	Amount of Each Receipt this Period 250.00
	Name of Employer Massachusetts Hospital Association	Occupation Sr. VP of Member Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Γ,	SUBTOTAL of Receipts This Page (optional)		850.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56/1/8 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		· · ·	
Full Name (Last, First, Middle Initial) Mr. Michael E. Sroczynski, Esq.			Date of Receipt
Mailing Address 681 East 5th Street #2			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17606050
Boston FEC ID number of contributing federal political committee.	C	02127-3201	Amount of Each Receipt this Period 350.00
Name of Employer Massachusetts Hospital Association Receipt For: Primary General Other (specify) ▼		n sident, Government Relation e Year-to-Date ▼ 350.00	is
Full Name (Last, First, Middle Initial) Mr. Paul W. Allison Mailing Address 36 Mitchell Grant	-		Date of Receipt
City	State	Zip Code	1 0 1 3 2 0 0 9 Transaction ID: 17606054
Bedford	MA	01730-1264	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Cambridge Health Alliance	Occupatio General		7
Receipt For: Primary General Other (specify) ▼	_ + +	e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Mr. Eric J. Beyer			Date of Receipt
Mailing Address 641 Salem End Roa	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17606055
Framingham FEC ID number of contributing federal political committee.	C	01702-5529	Amount of Each Receipt this Period 300.00
Name of Employer Tufts Medical Center	Occupatio Presiden		
Receipt For: Primary General Other (specify) ▼	_, '	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional))		1150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57/178 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,	
Full Name (Last, First, Middle Initial) Ms Linda Bodenmann			Date of Receipt
Mailing Address 363 Highland Avenu	e		10 13 2009
City Fall River	State MA	Zip Code 02720-3703	Transaction ID: 17606056
FEC ID number of contributing federal political committee.	C	02/20-3/03	Amount of Each Receipt this Period 250.00
Name of Employer Southcoast Hospitals Group	Occupation Chief Op	n erating Officer	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms Kathryn Burke			Date of Receipt
Mailing Address 1561 Quaker Street			10 13 2009
City Northbridge	State MA	Zip Code	Transaction ID: 17606057
FEC ID number of contributing federal political committee.	C	01534-1328	Amount of Each Receipt this Period 400.00
Name of Employer Mount Auburn Hospital	Occupation V P Con	n htracting & Bus. Developmen	
Receipt For: Primary General Other (specify) ▼	'	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Charles Gijanto			Date of Receipt
Mailing Address 38 Captain Lathrop	Dr		10 13 2009
City South Deerfield	State MA	Zip Code	Transaction ID: 17606058
FEC ID number of contributing federal political committee.	C	01373-1105	Amount of Each Receipt this Period 250.00
Name of Employer Baystate Franklin Medical Center	Occupation Presiden	t	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
			900.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr William Grigg		Date of Receipt
Mailing Address 363 Highland Avenue	Chaha 7in Cada	10 13 2009
City Fall River	State Zip Code MA 02720-3700	Transaction ID: 17606064 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Southcoast Hospitals Group	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Keith A. Hovan		Date of Receipt
Mailing Address 316 Marys Pond Rd		10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17606065
Rochester	MA 02770-4012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Southcoast Hospitals Group	Occupation President & CEO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr William Ibbotson		Date of Receipt
Mailing Address 43 Seven Hills Road		10 13 2009
City	State Zip Code	Transaction ID: 17606066
Plymouth FEC ID number of contributing federal political committee.	MA 02360-4633	Amount of Each Receipt this Period 250.00
Name of Employer Kindred Hospital Northeas- t-Stoughton	Occupation Director Patient Accounts	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	<u> </u>	

Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Dr. Richard Iseke, , M.D. Mailing Address P O Box 189 City Lawrence FEC ID number of contributing federal political committee.	State Zip Code MA 01842-0389 C Occupation Vice President, Medical Affairs & CMO	Date of Receipt Date of Receipt Transaction ID: 17606067 Amount of Each Receipt this Period 250.00
Dr. Richard Iseke, , M.D. Mailing Address P O Box 189 City Lawrence FEC ID number of contributing	MA 01842-0389 C Occupation	1 0 1 3 2 0 0 9 Transaction ID: 17606067 Amount of Each Receipt this Period
Name of Employer Winchester Hospital Receipt For:	· · · · · · · · · · · · · · · · · · ·	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Deborah C. Joelson Mailing Address 800 Washington Street	, #451	Date of Receipt
City	State Zip Code	Transaction ID: 17606068
Boston	MA 02111-1552	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tufts Medical Center	Occupation Sr VP/Market Development and Planni	ina
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Dennis D Keefe		Date of Receipt
Mailing Address 35 Warthin Circle		10 13 2009
City	State Zip Code	Transaction ID: 17606069
Norwood	MA 02062-5667	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Cambridge Health Alliance	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	
SUBTOTAL of Receipts This Page (optional)		1100.00

Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may name and add	y not be sold or used by any perso	n for the nurness of coliniting contributions
NAME OF COMMITTEE (In Full)		dress of any political committee to	solicit contributions from such committee.
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Mr. Edward Kelly			Date of Receipt
Mailing Address 14 Prospect Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Milford	State MA	Zip Code 01757-3090	Transaction ID: 17606070 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Milford Regional Medical Center	Occupation Vice Pres	n sident Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Dale M Lodge			Date of Receipt
Mailing Address 41 Highland Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Winchester	State MA	Zip Code	Transaction ID: 17606071
FEC ID number of contributing federal political committee.	C	01890-1496	Amount of Each Receipt this Period 250.00
Name of Employer Winchester Hospital	Occupation	n t and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr Eugene McMahon, , M.D.			Date of Receipt
Mailing Address 363 Highland Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fall River	State MA	Zip Code 02720-3700	Transaction ID: 17606072 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	02/20 0/00	250.00
Name of Employer Southcoast Hospitals Group	Occupation Senior V	n ice President and Chief Medi	ca
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kathy Schuler Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify)	State Zip Code MA 01880-1544 C Occupation CNO Aggregate Year-to-Date 250.00	Date of Receipt M M J D D J Z D O 9 Transaction ID: 17606080 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. William J. Shickolovich Mailing Address 585 Sharpners Pond City North Andover FEC ID number of contributing federal political committee. Name of Employer Tufts Medical Center Receipt For: Primary General Other (specify)	Road State Zip Code MA 01845-3335 C Occupation Chief Information Officer Aggregate Year-to-Date 280.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Peter L Slavin, , M.D. Mailing Address 55 Fruit Street City Boston FEC ID number of contributing federal political committee. Name of Employer Massachusetts General Hospital Receipt For:	State Zip Code MA 02114-2622 C Occupation President Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	1000.00	1030.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 178 (check only one) X 11a 11b 11c 12 15 16 11
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Mr Kevin Smith Mailing Address 41 Highland Avenue City Winchester FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For:	State Zip Code MA 01890-1496 C Occupation Vice President Finance & Administration Aggregate Year-to-Date	Date of Receipt M M M
— В.	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Catherine B. Squires, CFRE Mailing Address 800 Washington Stree	250.00	Date of Receipt
	City Boston FEC ID number of contributing federal political committee.	State Zip Code MA 02111-1552	1 0 1 3 2 0 0 9 Transaction ID: 17606084 Amount of Each Receipt this Period 250.00
	Name of Employer Tufts Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Vice President for Development Aggregate Year-to-Date 250.00	
-).	Full Name (Last, First, Middle Initial) Jeffrey A Weinstein Mailing Address 22 Nathan Lord Road		Date of Receipt
	City Amherst FEC ID number of contributing federal political committee.	State Zip Code MA 0301	Transaction ID: 17606086 Amount of Each Receipt this Period 280.00
	Name of Employer Tufts Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Sr. Vice President and General Counse Aggregate Year-to-Date 280.00	- gl
	SUBTOTAL of Receipts This Page (optional))	780.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any persore name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. George Gerlach		Date of Receipt
Mailing Address 345 Tenth Avenue City	State Zip Code	1 0 1 3 2 0 0 9 Transaction ID: 17606136
Granite Falls	MN 56241-1499	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer Granite Falls Municipal Hospital and M	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Mr. James F Hanko		Date of Receipt
Mailing Address 1300 Anne St. NW		10 13 2009
City	State Zip Code	Transaction ID: 17606137
<u>Bemidji</u>	MN 56601-5103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer North Country Regional Ho- spital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Ms. Mary Maertens		Date of Receipt
Mailing Address 300 South Bruce Stree	et	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17606139
Marshall	MN 56258-3901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Avera Marshall Regional Medical Center	Occupation Director, Community Services	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		290.00
TOTAL This Period (last page this line number	<u> </u>	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 178 (check only one) X 11a
\ \	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
 	Full Name (Last, First, Middle Initial) Dr. Terence Pladson, , M.D. Mailing Address 1406 Sixth Avenue No City Saint Cloud FEC ID number of contributing federal political committee.	rth State Zip Code MN 56303-1900 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer CentraCare Health System Receipt For: Primary General Other (specify)	President and Chief Executive Officer Aggregate Year-to-Date ▼ 595.00	
	Full Name (Last, First, Middle Initial) Mr. Jon D Braband Mailing Address 1805 Hennepin Avenue	e North	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 17606149
	Glencoe	MN 55336-1416	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	95.00
	Name of Employer Glencoe Regional Health Services	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 270.00	
	Full Name (Last, First, Middle Initial) Ryan C Larsen		Date of Receipt
	Mailing Address 925 Reavis Street		10 14 2009
	City Falls City	State Zip Code NE 68355-3142	Transaction ID: 17608323
	FEC ID number of contributing federal political committee.	C 68333-3142	Amount of Each Receipt this Period 350.00
	Name of Employer Community Medical Center	Occupation CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)		540.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 178 (check only one) X 11a
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not e name and addres	t be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Peter W Siersma			Date of Receipt
	Mailing Address P.O. Box 765			10 14 2009
	City Williamsburg	State MA	Zip Code 01096-0765	Transaction ID: 17608612 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Cooley Dickinson Hospital	Occupation Trustee		
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. Keith C. McLean-Shinaman			Date of Receipt
	Mailing Address 53n Hayes Road			10 16 2009
	City	State	Zip Code	Transaction ID: 17616580
	Tariffville	СТ	06081-9631	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Baystate Health, Inc.	Occupation Chief Finance	sial Officer	
	Receipt For:	Aggregate Yea	ar-to-Date ▼	
	Primary General Other (specify) ▼	0 0 0	250.00]
_	Full Name (Last, First, Middle Initial) Mr. Peter J Holden			Date of Receipt
	Mailing Address 275 Sandwich Street			10 16 2009
	City	State	Zip Code	Transaction ID: 17616581
	Plymouth FEC ID number of contributing federal political committee.	C	02360-2183	Amount of Each Receipt this Period 275.00
	Name of Employer Jordan Hospital	Occupation President an	d Chief Executive Office	r
	Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 625.00	
	SUBTOTAL of Receipts This Page (optional)			775.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 178 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Gary L Gottlieb, , M.D. Mailing Address 75 Francis Street			Date of Receipt
City Boston	State MA	Zip Code 02115-6106	Transaction ID: 17616582 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Brigham and Women's Hospi-	Occupatio Presiden		1000.00
tal Receipt For: Primary General Other (specify) ▼	 	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Dennis W. Chalke Mailing Address 80 Jonquil Lane	-		Date of Receipt M M D D / Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17616583
Longmeadow	MA	01106-2240	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Baystate Medical Center		sident, Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr. Patrick Jordan, III	•		Date of Receipt
Mailing Address 2014 Washington S	Street		10 16 2009
City	State	Zip Code	Transaction ID: 17616586
Newton Lower Falls FEC ID number of contributing federal political committee.	C	02462-1699	Amount of Each Receipt this Period 500.00
Name of Employer Newton-Wellesley Hospital	Occupatio Chief Op	n erating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		1750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 178 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association Page 1	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Michael Jellinek, , M.D. Mailing Address 2014 Washington	Street	Date of Receipt
City Newton Lower Falls	State Zip Code MA 02462-1607	Transaction ID: 17616587 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Newton-Wellesley Hospital	Occupation President	500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Robert G Norton, , CHE Mailing Address 81 Highland Aven	ue	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17616590
<u>Salem</u>	MA 01970-2768	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer North Shore Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	
Full Name (Last, First, Middle Initial) Mr. Darren Caldwell	·	Date of Receipt
Mailing Address P O Box 32		10 16 2009
City	State Zip Code	Transaction ID: 17616598
De Witt FEC ID number of contributing federal political committee.	AR 72042-0032	Amount of Each Receipt this Period 227.50
Name of Employer DeWitt Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
SUBTOTAL of Receipts This Page (optio	nal)	1127.50

	LE A (FEC Form 3X) O RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information or for commerce	n copied from such Reports and S cial purposes, other than using the	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	COMMITTEE (In Full) Hospital Association PAC			
Mr. James D				Date of Receipt
	dress PO Box 797			10 16 2009
City		State	Zip Code	Transaction ID: 17616599
	mber of contributing ical committee.	AR C	71701-0797	Amount of Each Receipt this Period 325.00
	nployer ledical Center	Occupation		
Receipt For		Presiden	t Year-to-Date ▼	\dashv
Prima		Aggregate	325.00	
Full Name ((Last, First, Middle Initial) eel	1		Date of Receipt
Mailing Add	dress 419 Natural Resources	s Drive		10 16 2009
City		State	Zip Code	Transaction ID: 17616600
<u>Little Roc</u>	<u>k</u>	AR	72205-1576	Amount of Each Receipt this Period
	mber of contributing ical committee.	C		325.00
Name of Er Arkansas H tion	nployer Hospital Associa-	Occupation Vice Pres		
Receipt For		Aggregate	Year-to-Date V	
Prima Other	ary	0 0	325.00	
Full Name (Mr. Paul Cu	(Last, First, Middle Initial) nningham	1		Date of Receipt
Mailing Add	dress 419 Natural Resources	s Drive		10 16 2009
City	_	State	Zip Code	Transaction ID: 17616601
<u>Little Roc</u>		AR	72205-1576	Amount of Each Receipt this Period
	mber of contributing ical committee.	C		325.00
tion	nployer Hospital Associa-		ce President	
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 825.00	
				975.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 178 (check only one) X 11a
Any information copied from such Reports or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) American Hospital Association P.	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert Gant Mailing Address 25 White Oak Dri City	State Zip Code	Date of Receipt 10 16 2009 Transaction ID: 17616604
Conway FEC ID number of contributing federal political committee.	AR 72034-3443	Amount of Each Receipt this Period 227.50
Name of Employer Conway Regional Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Board Member Aggregate Year-to-Date ▼ 227.50	
Full Name (Last, First, Middle Initial) Mr. Russell D. Harrington, , Jr., FAC Mailing Address 9601 Interstate 63	30, Exit 7	Date of Receipt 10 16 2009
City	State Zip Code	Transaction ID: 17616605
Little Rock FEC ID number of contributing federal political committee.	AR 72205-7202	Amount of Each Receipt this Period 325.00
Name of Employer Conway Regional Medical Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 325.00	
Full Name (Last, First, Middle Initial) Mr. Ray Kordsmeier	I	Date of Receipt
Mailing Address 1023 Oak St.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17616607
Conway FEC ID number of contributing federal political committee.	AR 72032-4354	Amount of Each Receipt this Period 227.50
Name of Employer Conway Regional Medical Center	Occupation Trustee	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
SUBTOTAL of Receipts This Page (optic	nal)	780.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	С	
Full Name (Last, First, Middle Initial) Mr. Edward L. Lacy, , FACHE Mailing Address COLO L. L. 110 M.		Date of Receipt
Mailing Address 2319 Hwy. 110 We		10 16 2009
City Heber Springs	State Zip Code AR 72543-3442	Transaction ID: 17616609 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	227.50
Name of Employer Baptist Healfh Medical Ce- nter-Heber Sp	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
Full Name (Last, First, Middle Initial) Mr Terry R Lambert		Date of Receipt
Mailing Address PO Box 839		10 16 2009
City	State Zip Code	Transaction ID: 17616610
Walnut Ridge	AR 72476-0839	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	227.50
Name of Employer Lawrence Memorial Hospital	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	227.50	
Full Name (Last, First, Middle Initial) Mr. Peter Leer, , FACHE		Date of Receipt
Mailing Address 620 N Willow St.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17616614
<u>Harrison</u>	AR 72601-2994	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	227.50
Name of Employer UAMS Medical Center	Occupation Associate Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
SUBTOTAL of Receipts This Page (optional	al)	682.50
	nber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 178 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persor he name and address of any political committee to	
Full Name (Last, First, Middle Initial) Ms Debbie Love Mailing Address 419 Natural Resource City Little Rock	es Drive State Zip Code AR 72205-1576	Date of Receipt M M M / D D M Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify)	Occupation Director of Financial Services Aggregate Year-to-Date 260.00	260.00
Full Name (Last, First, Middle Initial) Mr Mark Lowman Mailing Address 9601 Interstate 630, City Little Rock FEC ID number of contributing federal political committee. Name of Employer Baptist Health Receipt For: Primary General Other (specify)	Exit 7 State Zip Code AR 72205-7299 C Occupation Vice President Strategic Development Aggregate Year-to-Date 227.50	Date of Receipt M M J J D J C J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. James L. Magee Mailing Address 1206 Gordon Duckw City Piggott FEC ID number of contributing federal political committee. Name of Employer Piggott Community Hospital Receipt For: Primary General Other (specify)	orth Drive State Zip Code AR 72454-1911 C Occupation Executive Director Aggregate Year-to-Date ▼	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	715.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 178 (check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAG		
Full Name (Last, First, Middle Initial) Mr. Mike McCoy Mailing Address 1808 West Main St	reet	Date of Receipt 10 16 2009
City Russellville	State Zip Code AR 72801-2724	Transaction ID: 17616618 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	227.50
Name of Employer Saint Mary's Regional Medical Center Receipt For: Primary Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 227.50	1
Full Name (Last, First, Middle Initial) Mr. Harold E Mitchell, , Jr. Mailing Address 404 South Bradley	Street	Date of Receipt
City	State Zip Code	1 0 1 6 2 0 0 9 Transaction ID: 17616620
Warren	AR 71671-3493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	227.50
Name of Employer Bradley County Medical Ce- nter	Occupation Administrator and Chief Executive Of	ffi
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
Full Name (Last, First, Middle Initial) Mr. Larry Morse	•	Date of Receipt
Mailing Address P O Box 738		10 16 2009
City	State Zip Code	Transaction ID: 17616621
Clarksville FEC ID number of contributing federal political committee.	AR 72830-0738	Amount of Each Receipt this Period 227.50
Name of Employer Johnson Regional Medical Center	Occupation Chief Executive Officer and Administ	ra
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
SUBTOTAL of Receipts This Page (optional		682.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any perso g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Jennifer Nolan Mailing Address 21 Bridgeway Road City North Little Rock FEC ID number of contributing federal political committee. Name of Employer BridgeWay, The Receipt For:	d State Zip Code AR 72113-9514 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Ben E. Owens, , FACHE Mailing Address Post Office Box 93	227.50	Date of Receipt
City Jonesboro FEC ID number of contributing federal political committee. Name of Employer St. Bernards Medical Center Receipt For: Primary General Other (specify)	State Zip Code AR 72403-9320 C Occupation President & Chief Executive Officer Aggregate Year-to-Date 227.50	Transaction ID: 17616623 Amount of Each Receipt this Period 227.50
Full Name (Last, First, Middle Initial) Mr. Scott Peek Mailing Address Highway 10 at Det City Danville FEC ID number of contributing federal political committee. Name of Employer Chambers Memorial Hospital Receipt For: Primary General Other (specify)	State Zip Code AR 72833 C Occupation President Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (options	al)	780.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Herbert K. Reamey, III, FACHE Mailing Address P O Box 206		Date of Receipt
City	State Zip Code	1 0 1 6 2 0 0 9 Transaction ID: 17616625
<u>Magnolia</u>	AR 72031-0206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	227.50
Name of Employer Ozark Health Medical Cent- er	Occupation Chief Executive Officer and Administra	a_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
Full Name (Last, First, Middle Initial) Mr. Ronald K Rooney, , FACHE	'	Date of Receipt
Mailing Address P O Box 339	7.0.1	10 16 2009
City	State Zip Code	Transaction ID: 17616626
Paragould FEC ID number of contributing federal political committee.	AR 72451-0339	Amount of Each Receipt this Period 325.00
Name of Employer Arkansas Methodist Medical	Occupation	_
Center Receipt For:	President Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	325.00	
Full Name (Last, First, Middle Initial) Ms Rosi Smith	I	Date of Receipt
Mailing Address 800 Marshall Street	t	10 16 2009
City <u>Little Rock</u>	State Zip Code AR 72202-3591	Transaction ID: 17616628 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	227.50
Name of Employer Arkansas Children's Hospi- tal	Occupation Government Relations Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	227.50	
SUBTOTAL of Receipts This Page (optional	· II)	780.00
TOTAL This Period (last page this line num	ber only)	

ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75/178 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Scott Williams			Date of Receipt
Mailing Address 100 Rivendell Drive			10 16 2009
City Benton	State AR	Zip Code 72019-9188	Transaction ID: 17616629 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		227.50
Name of Employer Rivendell Behavioral Heal- th Services o Receipt For: Primary General Other (specify) ▼	'	n rator and Chief Executive Of Year-to-Date ▼ 227.50]
Full Name (Last, First, Middle Initial) Mr. Jim Boote Mailing Address 2490 London Lane			Date of Receipt 10 16 2009
City	State	Zip Code	Transaction ID: 17616635
Vineland FEC ID number of contributing federal political committee.	NJ C	08361-7740	Amount of Each Receipt this Period 250.00
Name of Employer South Jersey Healthcare	Occupatio Vice Pres		
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins			Date of Receipt
Mailing Address 6180 Lower Mounta	in Road		M M / D D / Y Y Y Y Y 1 1 0 1 6 2 0 0 9
City	State	Zip Code	Transaction ID: 17616653
New Hope FEC ID number of contributing federal political committee.	C	18938-5760	Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Assoc- iation		Health Economics	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.78]
SUBTOTAL of Receipts This Page (optiona	<u> </u>		482.50

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per- ne name and address of any political committee	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt
Mailing Address 23 E. Delaware Aven		10 16 2009
City Pennington	State Zip Code NJ 08534-2302	Transaction ID: 17616654 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	
Full Name (Last, First, Middle Initial) Mr. Gordon N. Litwin Mailing Address 63 Borden Place		Date of Receipt
Mailing Address 63 Borden Place		10 16 2009
City Little Silver	State Zip Code NJ 07739-1726	Transaction ID: 17616660
FEC ID number of contributing federal political committee.	NJ 07739-1726	Amount of Each Receipt this Period 250.00
Name of Employer Meridian Health	Occupation Vice Chairman	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Michelle Hood		Date of Receipt
Mailing Address P O Box 404		M M / D D / Y Y Y Y Y 1 Y 1 1 0 1 9 2 0 0 9
City	State Zip Code	Transaction ID: 17616675
Bangor FEC ID number of contributing federal political committee.	ME 04402-0404	Amount of Each Receipt this Period 250.00
Name of Employer Eastern Maine Healthcare Systems	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		505.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 178 (check only one) X
A C	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Ms. Mary C. Mayhew Mailing Address 150 Capitol Street City Augusta	State ME	Zip Code 04330-6858	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer Maine Hospital Association Receipt For: □ Primary □ General □ Other (specify) ▼		nsident, Government Affairs Year-to-Date 250.00	250.00
— В.	Full Name (Last, First, Middle Initial) Mr. Joseph W. Marshall, III Mailing Address 3409 North Broad Stree	State	Zip Code	Date of Receipt 1 0 2 0 2 0 9 Transaction ID: 17618678
	Philadelphia FEC ID number of contributing federal political committee. Name of Employer Temple University Health System Receipt For: Primary General Other (specify)	PA C Occupation Chairman Aggregate		Amount of Each Receipt this Period 1000.00
 C.	Full Name (Last, First, Middle Initial) Mr. Mark R Tolosky, , FACHE, J Mailing Address 759 Chestnut Street City Springfield FEC ID number of contributing federal political committee.	State MA	Zip Code 01199-1001	Date of Receipt 10 20 2009 Transaction ID: 17621781 Amount of Each Receipt this Period 500.00
	Name of Employer Baystate Health, Inc. Receipt For: Primary General Other (specify)		t and Chief Executive Officer Year-to-Date 500.00]
:	SUBTOTAL of Receipts This Page (optional))	1750.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16
any information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Donald J Dragon		Date of Receipt
Mailing Address 135 Forrest Street #9		10 20 2009
City	State Zip Code	Transaction ID: 17621782
Plaistow	NH 03865-2638	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	270.00
Name of Employer Kindred Hospital Northeas- t-Stoughton	Occupation Clinical Liaison	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	270.00	
Full Name (Last, First, Middle Initial) Mr. Timothy F. Gens		Date of Receipt
Mailing Address 5 New England Exec	utive Park	10 20 2009
City	State Zip Code	Transaction ID: 17621783
Burlington	MA 01803-5010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	225.00
Name of Employer Massachusetts Hospital As- sociation	Occupation Executive Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Ms. Mary C. Becker		Date of Receipt
Mailing Address 7800 South Eagle Ro	pad	10 20 2009
City	State Zip Code	Transaction ID: 17621799
Columbia	MO 65203-9017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	43.75
Name of Employer Missouri Hospital Associa- tion	Occupation Senior VP, Commc. & Health Impro	ventent
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
		538.75

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
4.	Full Name (Last, First, Middle Initial) Mr. Daniel R. Landon Mailing Address 611 Belridge Drive P.O. Box 60			Date of Receipt 10 20 7 2009
	City	State	Zip Code	Transaction ID: 17621818
	Jefferson City FEC ID number of contributing federal political committee.	C	65109-0755	Amount of Each Receipt this Period 62.50
	Name of Employer Missouri Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼		n President, Governmental Re e Year-to-Date ▼ 500.00	elat
- 3.	Full Name (Last, First, Middle Initial) Ms. Kathleen C. Poff Mailing Address 5119 Coventry Waye			Date of Receipt
	City	State	Zip Code	1 0 2 0 2 0 9 Transaction ID: 17621824
	Jefferson City	MO	65101-8284	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		43.75
	Name of Employer Missouri Hospital Associa- tion		ice President & CFO	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
- }.	Full Name (Last, First, Middle Initial) Mr. Jerry M. Sill, J.D.			Date of Receipt
	Mailing Address 2906 Valley View Terra	ace		10 20 7 2009
	City	State	Zip Code	Transaction ID: 17621826
	<u>Jefferson City</u>	MO	65109-1069	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		43.75
	Name of Employer Missouri Hospital Associa- tion	. '	ice President & General Cou	inse
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 11
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			<u>-</u>
۱.	Full Name (Last, First, Middle Initial) Mr. Marc D. Smith Meiling Address - FC40 Terrory Bridge B			Date of Receipt
	Mailing Address 5612 Tanner Bridge R			10 20 7 2009
	City Jefferson City	State MO	Zip Code 65101-8275	Transaction ID: 17621827
	FEC ID number of contributing federal political committee.	C	03101-0273	Amount of Each Receipt this Period 125.00
	Name of Employer Missouri Hospital Associa- tion	Occupation Presiden	n It and CEO	
	Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Dr. William Ferniany Mailing Address 500 22nd Street South	Cto 40		Date of Receipt
	Maining Address 500 22rid Street South	ı, Ste. 40		10 23 2009
	City Birmingham	State A L	Zip Code	Transaction ID: 17623948
	FEC ID number of contributing federal political committee.	C	35233-3110	Amount of Each Receipt this Period
	Name of Employer UAB Health System	Occupatio CEO	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Dr. Michael Waldrum, , M.D.			Date of Receipt
	Mailing Address 619 South 19th Street			10 23 7 9 9
	City Birmingham	State A L	Zip Code 35233-6505	Transaction ID: 17623949
	FEC ID number of contributing federal political committee.	C	33233-0303	Amount of Each Receipt this Period 750.00
	Name of Employer University of Alabama Hos- pital	Occupation Chief Ex	n ecutive Officer	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
Г		1		1875.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 178 (check only one) X
A 0'	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
٩.	Full Name (Last, First, Middle Initial) Dr Nancy Johns		Date of Receipt
	Mailing Address 2749 Southwood Road		10 23 2009
	City Birmingham	State Zip Code AL 35223-1228	Transaction ID: 17623950 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Kirkland Clinic at UAB	Occupation Chief Of Staff	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
 3.	Full Name (Last, First, Middle Initial) Ms Talana Bell		Date of Receipt
	Mailing Address P O Box 6907		10 23 7 2009
	City	State Zip Code	Transaction ID: 17623951
	Dothan FEC ID number of contributing federal political committee.	AL 36302-6907	Amount of Each Receipt this Period 500.00
	Name of Employer Flowers Hospital	Occupation Chief Financial Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
 ;.	Full Name (Last, First, Middle Initial) Mr Robert H Cofield		Date of Receipt
	Mailing Address 202 Morris Blvd.		10 23 7 2009
	City Birmingham	State Zip Code AL 35209-5121	Transaction ID: 17623952 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	337.00
	Name of Employer UAB Highlands	Occupation COO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 337.00	
Г		1	1337.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicit or for commercial purposes, other than using the name and address of any political committee to solicit contributions from: NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Don Hogan Mailing Address 199 Wesobulga Street City Lineville AL Sac6-4743 FEC ID number of contributing federal political committee. Name of Employer Clay County Hospital Primary General Other (specify) ▼ State Zip Code Ala Aggregate Vear-to-Date FUI Name (Last, First, Middle Initial) Mr. Donald Henderson Mailing Address 8213 Marsh Pointe Drive City Montgomery AL State Zip Code Aggregate Vear-to-Date Transaction ID: 17 Amount of Each Re Date of Receipt Transaction ID: 17 Amount of Each Re FEC ID number of contributing federal political committee. C Primary General Other (specify) ▼ C C C C Full Name (Last, First, Middle Initial) Mr. Donald Henderson Mailing Address 8213 Marsh Pointe Drive City State C Full Name (Last, First, Middle Initial) Mike McCafferty Mailing Address 1401 West Fifth Street City Sheridan WY S2801-2705 Transaction ID: 17 Amount of Each Re FEC ID number of contributing federal political committee. C C City Sheridan WY S2801-2705 Transaction ID: 17 Amount of Each Re Tra	PAGE 82 / 178 11c
A. American Hospital Association PAC Full Name (Last, First, Middle Initial) Mailing Address 199 Wesobulga Street City Lineville AL 36266-4743 FEC ID number of contributing federal political committee. Name of Employer Clay County Hospital Pharmacy Director Parimary Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Donald Henderson Mailing Address 8213 Marsh Pointe Drive City Montgomery AL 36117-7432 FEC ID number of contributing federal political committee. City Montgomery AR 36117-7432 FEC ID number of contributing federal political committee. City Name of Employer Ala 36117-7432 FEC ID number of contributing federal political committee. City Mil Name (Last, First, Middle Initial) Mike McCafferty Mailing Address 1401 West Fifth Street City State City State City Cocupation President City State City State City Cocupation President City State City State City State City Cocupation President City State City Cocupation	iting contributions such committee.
Mailing Address 199 Wesobulga Street City Lineville AL 36266-4743 Transaction ID: 17 Amount of Each Receipt FEC ID number of contributing federal political committee. Name of Employer Clay County Hospital Primary Qeneral Other (specify) ▼ City Mailing Address 8213 Marsh Pointe Drive City Montgomery FEC ID number of contributing federal political committee. Name of Employer Jackson Hospital and Clinical Receipt For: Primary Qeneral Other (specify) ▼ State Zip Code ABJ Transaction ID: 17 Amount of Each Receipt M	
City Lineville AL 36266-4743 FEC ID number of contributing federal political committee. Name of Employer Clay County Hospital Pharmacy Director Receipt For: Primary General Other (specify) ▼	/ Y
Lineville AL 36266-4743 Amount of Each Re FEC ID number of contributing federal political committee. Name of Employer Jackson Hospital Name (Last, First, Middle Initial) Name of Employer Jackson Hospital and Clinic Receipt For: Primary General Occupation Mailing Address 1401 West Fifth Street Name of Employer State Zip Code Primary General Occupation President Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 17 Amount of Each Re Aggregate Year-to-Date Date of Receipt Transaction ID: 17 Amount of Each Re Date of Receipt Transaction ID: 17 Amount of Each Re Date of Receipt Transaction ID: 17 Amount of Each Re Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Agnount of Each Re Coccupation CEO Aggregate Year-to-Date ▼	2009
FEC ID number of contributing federal political committee. Name of Employer Clay County Hospital Receipt For:	
Receipt For: Primary	250.00
Primary General Other (specify) ▼	
Mailing Address 8213 Marsh Pointe Drive City State Zip Code Transaction ID: 17 Montgomery AL 36117-7432 FEC ID number of contributing federal political committee. Name of Employer Jackson Hospital and Clinic Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mike McCafferty Mailing Address 1401 West Fifth Street City State Zip Code Transaction ID: 17 Sheridan Wy 82801-2705 FEC ID number of contributing federal political committee. Name of Employer Sheridan Wy 82801-2705 FEC ID number of contributing federal political committee. Name of Employer Sheridan Memorial Hospital Receipt For: Primary General Occupation CEO Receipt For: Primary General Occupation CEO Aggregate Year-to-Date ▼	
City State Zip Code Montgomery AL 36117-7432 FEC ID number of contributing federal political committee. Name of Employer Jackson Hospital and Clinic Receipt For: Primary General Other (specify) ▼ City State Zip Code Aggregate Year-to-Date ▼ Transaction ID: 17 Amount of Each Re President Aggregate Year-to-Date ▼ Transaction ID: 17 Amount of Each Re Date of Receipt Mike McCafferty Mailing Address 1401 West Fifth Street City State Zip Code Transaction ID: 17 Amount of Each Re Date of Receipt M M M J D D D D D D D D D D D D D D D D	
Montgomery AL 36117-7432 Amount of Each Re FEC ID number of contributing federal political committee. Name of Employer Jackson Hospital and Clinic Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mike McCafferty Mailing Address 1401 West Fifth Street City State Zip Code Transaction ID: 17 Sheridan WY 82801-2705 FEC ID number of contributing federal political committee. Name of Employer Sheridan Memorial Hospital Receipt For: Primary General Occupation CEO Receipt For: Aggregate Year-to-Date ▼ Occupation CEO Aggregate Year-to-Date ▼	
FEC ID number of contributing federal political committee. Name of Employer Jackson Hospital and Clinic Receipt For: Primary General Occupation President Other (specify) ▼	
Jackson Hospital and Clinic Receipt For: Primary Other (specify) Mailing Address City Sheridan FEC ID number of contributing federal political committee. Name of Employer Sheridan Memorial Hospital Receipt For: Name of Employer Sheridan Memorial Hospital Receipt For: President Aggregate Year-to-Date Aggregate Year-to-Date Table 1 Aggregate Year-to-Date To Date of Receipt M M M M D D D 1 9 1 9 1 9 Transaction ID: 17 Amount of Each Re C Receipt For: Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date	250.00
Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Mike McCafferty Mailing Address 1401 West Fifth Street City State Zip Code Sheridan WY 82801-2705 FEC ID number of contributing federal political committee. Name of Employer Sheridan Memorial Hospital Receipt For: C Aggregate Year-to-Date ▼ Primary General	
Mike McCafferty Mailing Address 1401 West Fifth Street City Sheridan FEC ID number of contributing federal political committee. Name of Employer Sheridan Memorial Hospital Receipt For: Primary Date of Receipt M M M J D D D 1 9 Transaction ID: 17 Amount of Each Re C Aggregate Year-to-Date Primary Date of Receipt M M M J D D D D D D D D D D D D D D D D	
City State Zip Code Transaction ID: 17 Sheridan WY 82801-2705 FEC ID number of contributing federal political committee. Name of Employer Sheridan Memorial Hospital Receipt For: Primary General □ 1 0 1 9 Transaction ID: 17 Amount of Each Re C Aggregate Year-to-Date ▼	
Sheridan WY 82801-2705 Amount of Each Re FEC ID number of contributing federal political committee. Name of Employer Sheridan Memorial Hospital Receipt For: Primary General Aggregate Year-to-Date ▼	
FEC ID number of contributing federal political committee. Name of Employer Sheridan Memorial Hospital Receipt For: Primary General C C Aggregate Year-to-Date	
Sheridan Memorial Hospital CEO Receipt For: Primary General Aggregate Year-to-Date □ Primary General	250.00
Primary General	
SUBTOTAL of Receipts This Page (optional)	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Terry W Andrus		Date of Receipt
Mailing Address 414 N. 10th Street	Chata 7'- Oada	10 26 2009
City <u>Opelika</u>	State Zip Code AL 36801-5452	Transaction ID: 17629609 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 30001-3432	1000.00
Name of Employer East Alabama Medical Cent- er	Occupation President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dennis Thrasher		Date of Receipt
Mailing Address 2190 Springwood Dri	ve	10 26 YYYYY 10 26 2009
City	State Zip Code	Transaction ID: 17629610
Auburn	AL 36830-7200	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer East Alabama Medical Cent- er	Occupation Asst. VP/Controller	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Laura Grill	_L	Date of Receipt
Mailing Address 2000 Pepperell Parkv	vay	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17629611
<u>Opelika</u>	AL 36801-5422	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer East Alabama Medical Cent- er	Occupation Vice President, Patient Services	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		3000.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 178 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John T Chitton Mailing Address 229 Lee Road 716 City Auburn FEC ID number of contributing federal political committee. Name of Employer East Alabama Medical Center	State Zip Code AL 36830-8534 C Occupation Vice President/CIO	Date of Receipt 10 26 2009 Transaction ID: 17629612 Amount of Each Receipt this Period 1000.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Ms. Jane Robertson Mailing Address 2161 Wedgewood C City	State Zip Code	Date of Receipt 10 26 2009 Transaction ID: 17629613
Auburn FEC ID number of contributing federal political committee. Name of Employer East Alabama Medical Cent-	AL 36830-2582 C Occupation	Amount of Each Receipt this Period 1000.00
er Receipt For: Primary General Other (specify)	Asst. V.P. Aggregate Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Mr. Christopher Clark Mailing Address 13045 Sawyer Drive		Date of Receipt 1 0 2 6 2 0 0 9
City	State Zip Code	Transaction ID: 17629626
Opelika FEC ID number of contributing federal political committee.	AL 36801	Amount of Each Receipt this Period 1000.00
Name of Employer East Alabama Medical Cent- er	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional		3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 178 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	the name and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Janice Baker Mailing Address 1798 Ogletree Roa	d		Date of Receipt
City Auburn FEC ID number of contributing	State AL	Zip Code 36830-7258	Transaction ID: 17629627 Amount of Each Receipt this Period 1000.00
Name of Employer East Alabama Medical Center Receipt For: Primary General Other (specify)	Occupation Vice Pres		
Full Name (Last, First, Middle Initial) Ms. Carey M. Owen Mailing Address 2520 Springwood [Orive		Date of Receipt 1 0 2 6 2 0 0 9
City	State	Zip Code	Transaction ID: 17629628
Auburn FEC ID number of contributing federal political committee.	C	36830-7236	Amount of Each Receipt this Period 1000.00
Name of Employer East Alabama Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Vice Pres Aggregate		
Full Name (Last, First, Middle Initial) Ms. Roben Nutter	L		Date of Receipt
Mailing Address 2000 Pepperell Pa	rkway		10 26 2009
City	State	Zip Code	Transaction ID: 17629629
Opelika FEC ID number of contributing federal political committee.	C	36801-5422	Amount of Each Receipt this Period 1000.00
Name of Employer East Alabama Medical Cent- er Receipt For:	_ , 	n Healthsource Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	al)		3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 178 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Carol Murphey Mailing Address 2710 Rocky Brook Rd. City Opelika FEC ID number of contributing federal political committee. Name of Employer East Alabama Medical Center Receipt For: Primary General Other (specify)	State Zip Code AL 36801-2132 C Occupation Asst. VP/ Outside Operations Aggregate Year-to-Date 1000.00	Date of Receipt M M / D D / 2 6 2 0 0 9 Transaction ID: 17629630 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Mr. Michael Lisenby Mailing Address 807 Laurel Street City Opelika FEC ID number of contributing federal political committee. Name of Employer East Alabama Medical Center Receipt For: Primary General Other (specify)	State Zip Code AL 36801-3519 C Occupation Chief Medical Officer Aggregate Year-to-Date 1000.00	Date of Receipt M M / 26 / 2009 Transaction ID: 17629637 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Mr. Ken Lott Mailing Address 1567 Oak Hill Circle City Auburn FEC ID number of contributing federal political committee. Name of Employer East Alabama Medical Center Receipt For: Primary General Other (specify)	State Zip Code AL 36832-6798 C Occupation Vice President, Operations Aggregate Year-to-Date 1000.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	•	3000.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any paname and address of any political committee	person for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Sam Price		Date of Receipt
Mailing Address 2000 Pepperell Parkwa	у	10 26 2009
City	State Zip Code	Transaction ID: 17629639
<u>Opelika</u>	AL 36802-3201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer East Alabama Medical Cent- er	Occupation Vice President, Finance	
Receipt For: Primary General	Aggregate Year-to-Date ▼	-
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Mr. Frank R. Brownell, III		Date of Receipt
Mailing Address Post Office Box 76 100 North 10th Street		10 26 2009
City	State Zip Code	Transaction ID: 17629965
<u>Montezuma</u>	IA 50171-0076	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Grinnell Regional Medical Center	Occupation Trustee	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) Mr. James G FitzPatrick		Date of Receipt
Mailing Address 11 Hackberry Road		10 26 2009
City	State Zip Code	Transaction ID: 17629966
Mason City	IA 50401-2505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Mercy Medical Center-North Iowa	Occupation President and Chief Executive Of	ficer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)		2500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any perso name and address of any political committee to	
Full Name (Last, First, Middle Initial) Mr. J. Kirk Norris Mailing Address 5055 Upper Creek Driv City Pleasant Hill FEC ID number of contributing federal political committee. Name of Employer lowa Hospital Association Receipt For: Primary General Other (specify)	e State Zip Code IA 50327 C Occupation President Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Russell M Knight Mailing Address 250 Mercy Drive City Dubuque FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center-Dubuque Receipt For: Primary General Other (specify)	State Zip Code IA 52001-7320 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Gary P Riedmann, , FACHE Mailing Address PO BOX 628 City Carroll FEC ID number of contributing federal political committee. Name of Employer St. Anthony Regional Hospital Receipt For: Primary General Other (specify)	State Zip Code IA 51401 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 26 / 2009 Transaction ID: 17629969 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)		1750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 178 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Dale Andres, D.O. Mailing Address 3647 North Shore City Clear Lake FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center-North lowa Receipt For: Primary General Other (specify)	State Zip Code IA 50428-1070 C Occupation Senior Vice President Physician Integ Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 2 6 2 0 0 9 Transaction ID: 17629976 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Richard A Seidler, , FACHE Mailing Address 1708 Partridge Lane City Waterloo FEC ID number of contributing federal political committee. Name of Employer Allen Memorial Hospital Receipt For: Primary General	State Zip Code IA 50701 C Occupation Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / 26 / 2009 Transaction ID: 17629977 Amount of Each Receipt this Period 500.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Carol A. Watson, Ph.D., RN Mailing Address 390 NB 50 Newton Road City Iowa City FEC ID number of contributing federal political committee. Name of Employer University of Iowa College of Nursing	State Zip Code IA 52242-9296 C Occupation Professor-Clinical	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 1075.00	1500.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER (check only one) X 11a 11b 11b 13	: PAGE 90 / 178 11c 12 15 16 11
or for commo	tion copied from such Reports and sercial purposes, other than using the F COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soli	citing contributions
	an Hospital Association PAC e (Last, First, Middle Initial)				
Dr. Larry	W Sellers, , M.D. ddress P O Box 3168			Date of Receipt	
City <u>Sioux C</u>	ity	State IA	Zip Code 51102-3168	Transaction ID: 1 Amount of Each F	
	number of contributing political committee.	C			500.00
Mercy Mo <u>City</u>	Employer edical Center-Sioux	Occupatio Chief Me	n edical Officer		
	-or: mary General ner (specify) ▼	Aggregate	e Year-to-Date 500.00		
Mr. David	e (Last, First, Middle Initial) H Vellinga, , FACHE ddress 1111 6th Avenue	I		Date of Receipt) / Y " Y " Y " Y
		Chaha	7:- O-d-	10 20	2009
City Des Mo	ines	State IA	Zip Code 50314-2613	Transaction ID: 1 Amount of Each F	
FEC ID r	number of contributing political committee.	С			500.00
Moines	Employer edical Center-Des	- '	t and Chief Executive Officer		
	For: mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00		
	e (Last, First, Middle Initial) as C Evans, M.D.			Date of Receipt	
Mailing A	ddress 1200 Pleasant Street			10 20	
City <u>Des Mo</u>	ines	State IA	Zip Code 50309-1453	Transaction ID: 1	Receipt this Period
FEC ID r	number of contributing plitical committee.	C	00000 1700	Amount of Each	500.00
Name of lowa Hea	Employer alth System	Occupatio Vice Pres	n sident and Chief Medical Offi	c	
	For: mary General ner (specify) ♥	Aggregate	e Year-to-Date ▼ 500.00		
SUBTOTAL	L of Receipts This Page (optional) .				1500.00
TOTAL Th	is Period (last page this line number	r only)	>		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 178 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any personne name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Jeffrey M Cooper		Date of Receipt
Mailing Address 1118 11th Street	Chata 7'- Cada	10 26 2009
City De Witt	State Zip Code IA 52742-1235	Transaction ID: 17630003 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 32742-1203	500.00
Name of Employer Genesis Medical Center, DeWitt	Occupation Vice President, DeWitt Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	_
Full Name (Last, First, Middle Initial) Mr. Eric T Crowell		Date of Receipt
Mailing Address 700 East University	Avenue	10 26 7 2009
City	State Zip Code	Transaction ID: 17630004
Des Moines	IA 50316-2302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer lowa Lutheran Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. William B Leaver		Date of Receipt
Mailing Address 8409 G24 Hwy		10 26 2009
City	State Zip Code	Transaction ID: 17630005
Indianola	IA 50125-8994	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Iowa Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SURTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Shannon Strickler Mailing Address 1403 66th Street City Windsor Heights` FEC ID number of contributing federal political committee. Name of Employer lowa Hospital Association Receipt For: Primary General	State Zip Code IA 50311 C Occupation Director, Government Relations Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M Z 6 Z 0 0 9 Transaction ID: 17630006 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Theodore E Townsend Mailing Address P O Box 3026 City Cedar Rapids FEC ID number of contributing federal political committee. Name of Employer St. Luke's Hospital Receipt For: Primary General	State Zip Code IA 52406-3026 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼	Date of Receipt M M Z 6 Z 0 0 9 Transaction ID: 17630023 Amount of Each Receipt this Period 500.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Peter W Thoreen Mailing Address 2720 Stone Park Bo City Sioux City FEC ID number of contributing federal political committee. Name of Employer St. Luke's Regional Medic-	State Zip Code IA 51104-3795 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
al Center Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional	President and Chief Executive Officer Aggregate Year-to-Date ▼ 547.50	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John C Sheehan Mailing Address P O Box 3026 City Cedar Rapids FEC ID number of contributing federal political committee. Name of Employer St. Luke's Hospital Receipt For: Primary General Other (specify)	State Zip Code IA 52406-3026 C Occupation Executive Vice President and COO Aggregate Year-to-Date 500.00	Date of Receipt M M M / 26 / 2009 Transaction ID: 17630025 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Timothy L Charles Mailing Address 701 Tenth Street SE City Cedar Rapids FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center Receipt For: Primary General Other (specify)	State Zip Code IA 52403-1251 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / 26 / 2009 Transaction ID: 17630026 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Suku Radia Mailing Address 4800 Stonebridge Circ City West Des Moines FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center Receipt For: Primary General Other (specify)	State Zip Code IA 50265-2982 C Occupation CFO Aggregate Year-to-Date 500.00	Date of Receipt M M A 26 2009 Transaction ID: 17630027 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)	•	1500.00

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Midling Address 1104 S. 5th Ave. W. City State Zip Code Newton FEC (D number of contributing federal political committee) Primary General Other (specify) ▼ State Zip Code Mailing Address 804 Wells Fargo Trl City State Zip Code Mailing Address 804 Wells Fargo Trl City State Zip Code Mailing Address 804 Wells Fargo Trl City State Zip Code Mailing Address 804 Wells Fargo Trl City State Zip Code Le Claire IA 52753-9398 FEC (D number of contributing federal political committee) FEC (D number of contributing federal political committee) FEC (D number of contributing federal political committee) C Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Denire		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A. Mr. Gary S. Kahn Mailing Address 1104 S. 5th Ave. W. City State Zip Code Newton IA 50208-3511 FEC ID number of contributing federal political committee. C Cocupation Trustee Receipt For: Primary General Other (specify) ▼ State Zip Code In Name of Engloyer General Other (specify) ▼ State Zip Code Le Claire IA 52753-9398 FEC ID number of contributing federal political committee. C Cocupation Trustee Receipt For: Primary General Other (specify) ▼ State Zip Code Le Claire IA 52753-9398 FEC ID number of contributing federal political committee. C Cocupation CEO Receipt For: Primary General Other (specify) ▼ State Zip Code Primary General Other (specify) ▼ State Zip Code Des Moines A White Mailing Address 100 East Graham Avenue Suite 100 City State Zip Code Des Moines IA 50339-1835 FEC ID number of contributing federal political committee. C C State Zip Code Des Moines IA 50339-1835 FEC ID number of contributing federal political committee. C State Zip Code Des Moines IA 50339-1835 FEC ID number of contributing federal political committee. C Scoupation Senior Vice President Receipt For: Primary General Other (specify) ▼ State Zip Code Des Moines IA 50339-1835 FEC ID number of contributing federal political committee. C Scoupation Senior Vice President Receipt For: Primary General Other (specify) ▼ Sou.00		or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements mand add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Receipt For: Primary	A .	Mr. Gary S. Kahn Mailing Address 1104 S. 5th Ave. W. City Newton FEC ID number of contributing	IA	•	Transaction ID: 17630031 Amount of Each Receipt this Period
Mr. Douglas P Cropper Mailing Address 804 Wells Fargo Trl City State Zip Code Le Claire IA 52753-9398 FEC ID number of contributing federal political committee. Name of Employer Genesis Health System CEO Full Name (Last, First, Middle Initial) Mr. Dennis A. White Mailing Address 100 East Graham Avenue Suite 100 City State Zip Code Receipt For: Primary General Other (specify) ▼ State Zip Code Des Moines IA 50309-1835 FEC ID number of contributing federal political committee. CC Name of Employer Suite 100 City State Zip Code Des Moines IA 50309-1835 FEC ID number of contributing federal political committee. Name of Employer Iowa Hospital Association Receipt For: Primary General Other (specify) ▼ Sou.00		Receipt For: Primary General	Trustee	e Year-to-Date ▼	
City State Zip Code IA 52753-9398 FEC ID number of contributing federal political committee. Name of Employer Genesis Health System Receipt For: Aggregate Year-to-Date ▼ Pull Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Pull Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Pull Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Pull Name (Last, First, Middle Initial) Date of Receipt Midling Address 100 East Graham Avenue Suite 100 City	- З.	Mr. Douglas P Cropper			M M / D D / Y Y Y Y
Genesis Health System CEO Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dennis A. White Mailing Address 100 East Graham Avenue Suite 100 City State Zip Code Des Moines FEC ID number of contributing federal political committee. Name of Employer lowa Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt M M / D D / 2 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Le Claire FEC ID number of contributing	IA	·	Amount of Each Receipt this Period
Mailing Address 100 East Graham Avenue Suite 100 City State Zip Code Des Moines IA 50309-1835 FEC ID number of contributing federal political committee. Name of Employer lowa Hospital Association Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 17630070 Amount of Each Receipt this Period Foo.00 Aggregate Year-to-Date ▼ 500.00		Receipt For: Primary General	CEO	e Year-to-Date ▼	
City State Zip Code IA 50309-1835 FEC ID number of contributing federal political committee. Name of Employer lowa Hospital Association Receipt For: Primary General Other (specify) ▼ State Zip Code Transaction ID: 17630070 Amount of Each Receipt this Period 500.00 Amount of Each Receipt this Period 500.00	-).	Mr. Dennis A. White Mailing Address 100 East Graham Aver	nue		M M / D D / Y Y Y Y
Name of Employer lowa Hospital Association Receipt For: Primary General Other (specify) ▼ Occupation Senior Vice President Aggregate Year-to-Date ▼ 500.00		City		•	Transaction ID: 17630070
Receipt For: Primary General Other (specify)		federal political committee.			500.00
Primary General Other (specify) ▼ 500.00			Senior V	ice President	
SUBTOTAL of Receipts This Page (ontional)		Primary General	00 10111		
SOBTOTAL OF FICEORIES THIS Flage (Optional)		SUBTOTAL of Receipts This Page (optional)		······	1500.00

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 178 (check only one) X
or for commercial purposes	, other than using the name and a	nay not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE American Hospital A	, ,		
Full Name (Last, First, M Ms. Rebecca J. Anthony	,		Date of Receipt
Mailing Address 100 I Suite	East Grand Avenue : 100 State	Zip Code	10 / 26 / 2009
Des Moines	IA	50309-1829	Transaction ID: 17630071 Amount of Each Receipt this Period
FEC ID number of contri federal political committee	buting	0000 1020	500.00
Name of Employer Iowa Hospital Association	Occupa Vice P	tion resident, Education	
Receipt For: Primary Other (specify)	 	ate Year-to-Date ▼ 500.00	
Full Name (Last, First, N Mr. Greg E. Boattenhamer			Date of Receipt
Suite	East Grand Avenue 100		10 26 7 2009
City	State	Zip Code	Transaction ID: 17630072
Des Moines	IA	50309-1829	Amount of Each Receipt this Period
FEC ID number of contri federal political committe			500.00
Name of Employer Iowa Hospital Association	n Occupa Sr. Vic	tion e President, Government Rela	atic
Receipt For: Primary Other (specify) ▼	Aggreg	ate Year-to-Date ▼ 500.00	
Full Name (Last, First, M. Ms. Maureen Keehnle	liddle Initial)		Date of Receipt
Suite	East Grand Avenue 100		10 26 2009
City	State	Zip Code	Transaction ID: 17630073
Des Moines	IA	50309-1817	Amount of Each Receipt this Period
FEC ID number of contri federal political committe	e.		500.00
Name of Employer lowa Hospital Associatio	VICE	resident and General Counsel	
Receipt For:		ate Year-to-Date ▼	_
Primary ☐ 0 Other (specify) ▼	General	500.00	
SUBTOTAL of Receipts T	his Page (optional)		1500.00
	age this line number only)	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person rename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Marilyn E. Kaptain-Dahlen Mailing Address 801 15th Street Box 203 City Sioux City FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center-Sioux City Receipt For: Primary General Other (specify)	State Zip Code IA 51105-1502 C Occupation Vice President, Regionalization Aggregate Year-to-Date 500.00	Date of Receipt M M / 26 / 2009 Transaction ID: 17630074 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Mark D Richardson Mailing Address 1221 South Gear Aver City West Burlington FEC ID number of contributing federal political committee. Name of Employer Great River Medical Center Receipt For: Primary General Other (specify)	State Zip Code IA 52655-1681 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / 26 / 2009 Transaction ID: 17630075 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr Jim Lehman Mailing Address 3090 Lundy Ln City Bettendorf FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center-Davenport Receipt For: Primary General Other (specify)	State Zip Code IA 52722-3975 C Occupation VP, Quality Aggregate Year-to-Date 300.00	Date of Receipt M M A 26 2009 Transaction ID: 17630076 Amount of Each Receipt this Period 300.00
SUBTOTAL of Receipts This Page (optional)		1300.00

or for commercial purposes, other than to NAME OF COMMITTEE (In Full) American Hospital Association Full Name (Last, First, Middle Initial) Barbara C. Peterson	ts and Statements may not be sold or used by any persor sing the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Barbara C. Peterson		
Mailing Address 701 10th St. SE City Cedar Rapids	State Zip Code IA 52403-1251	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.	Occupation	300.00
Name of Employer Mercy Medical Center Receipt For: Primary General Other (specify) ▼	Vice President Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Clinton J Christianson Mailing Address 1 St Joseph's D	rive	Date of Receipt 10 26 2009
City	State Zip Code	Transaction ID: 17630078
Centerville FEC ID number of contributing federal political committee.	IA 52544-9017	Amount of Each Receipt this Period 300.00
Name of Employer Mercy Medical Center-Cent- erville Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 300.00	
Full Name (Last, First, Middle Initial)		Date of Descript
Robert C Travis Mailing Address 4827 School Ho	ouse Rd	Date of Receipt 1 0 2 6 2 0 0 9
City Bettendorf	State Zip Code IA 52722-6577	Transaction ID: 17630079
FEC ID number of contributing federal political committee.	IA 52722-6577	Amount of Each Receipt this Period 262.50
Name of Employer Genesis Medical Center-Da- venport	Occupation VP of Strategic Development	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 262.50	
SUBTOTAL of Receipts This Page (op	tional)	862.50

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 178 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Jay Christiansen			Date of Receipt
	Mailing Address 731 Fox Run Dr City	State	Zip Code	1 0 2 6 2 0 0 9 Transaction ID: 17630722
	Bettendorf	IA	52722-3975	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		260.00
	Name of Employer Mahaska Health Partnership	Occupation Administration		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 260.00	
	Full Name (Last, First, Middle Initial) Mr. Gregory A Paris, , CHE			Date of Receipt
	Mailing Address 6580 165th Street			10 26 7 2009
	City	State	Zip Code	Transaction ID: 17630723
	Albia	<u>IA</u>	52531-8793	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Monroe County Hospital	Occupation Chief Ex	n ecutive Officer	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00]
-	Full Name (Last, First, Middle Initial) Mr. Joseph S Smith			Date of Receipt
	Mailing Address 1015 Union Street			10 26 2009
	City	State	Zip Code	Transaction ID: 17630724
	Boone	IA	50036-4898	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Boone County Hospital	- '	ecutive Officer	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
Г		1		760.00

Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. A. James Tinker Mailing Address 701 Tenth Street SE City State Cedar Rapids IA FEC ID number of contributing federal political committee. Name of Employer Mercy Medical Center Occup	e Zip Code 52403-1251 Deation dent and Chief Executive Officer	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mr. A. James Tinker Mailing Address 701 Tenth Street SE City State Cedar Rapids IA FEC ID number of contributing federal political committee. Name of Employer Marry Medical Center	52403-1251 Detailion dent and Chief Executive Officer	Transaction ID: 17630725 Amount of Each Receipt this Period
Mercy Medical Center	dent and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	egate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John M. Comstock Mailing Address 300 Sioux Valley Drive		Date of Receipt 1 0 2 6 2 0 0 9
City State Cherokee IA FEC ID number of contributing federal political committee. Name of Employer Occup	51012-1205	Transaction ID: 17630726 Amount of Each Receipt this Period 250.00
Cherokee Régiónal Medical Chief	Executive Officer egate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. David M. Miller Mailing Address Miller Dairy Sales, Ltd. Route 2 Box 163 City State	e Zip Code	Date of Receipt M
Chariton IA FEC ID number of contributing federal political committee. C	50049-9661	Amount of Each Receipt this Period 250.00
Name of Employer Lucas County Health Center Occup Trust		
Receipt For: Primary General Other (specify) ▼	egate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for	formation copied from such Reports and St commercial purposes, other than using the ME OF COMMITTEE (In Full) nerican Hospital Association PAC	tatements mag name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Ma Cit	Il Name (Last, First, Middle Initial) m Tibbitts iiling Address 802 Kenyon Road y ort Dodge C ID number of contributing	State IA	Zip Code 50501-5740	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Na Tri <u>Ce</u>	me of Employer nity Regional Medical enter ceipt For: Primary General Other (specify)	Occupatio CEO Aggregate	n e Year-to-Date ▼ 250.00	
M r.	Il Name (Last, First, Middle Initial) JIm Platt illing Address P O Box 174			Date of Receipt 1 0 2 6 2 0 0 9
FE	y ort Madison C ID number of contributing leral political committee.	State IA	Zip Code 52627-0174	Transaction ID: 17631350 Amount of Each Receipt this Period 250.00
Fo <u>sp</u> i	me of Employer rt Madison Community Ho- ital ceipt For: Primary General Other (specify)		ecutive Officer e Year-to-Date ▼ 250.00	
Mr.	Il Name (Last, First, Middle Initial) Todd C Linden illing Address 210 Fourth Avenue			Date of Receipt
Cit <u>Gr</u>	y innell	State IA	Zip Code 50112-1886	Transaction ID: 17631351 Amount of Each Receipt this Period
fed Na	C ID number of contributing leral political committee. me of Employer	C	n	250.00
<u>Ce</u>	innell Regional Medical inter ceipt For: Primary General Other (specify)		t and Chief Executive Officer e Year-to-Date ▼ 250.00	<u>. </u>
SUB	FOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 178 (check only one) X 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to	13 14 15 16 1 16 1 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19
NAME OF COMMITTEE (In Full) American Hospital Association PAG		
Full Name (Last, First, Middle Initial) Mrs. Lisa Schnedler		Date of Receipt
Mailing Address 304 Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17631352
<u>Keosauqua</u>	IA 52565-1164	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Van Buren County Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Allen E Pohren		Date of Receipt
Mailing Address P O Box 498		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17631360
Red Oak	IA 51566-0498	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Montgomery County Memorial Hospital	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Sandra L. McIntosh, RN, MA, CN		Date of Receipt
Mailing Address 1208 Woodland Dr.	SE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17631362
Cedar Rapids	IA 52403-9076	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Luke's Hospital	Occupation Director, Emergency Medical/Surgical	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
OUDTOTAL of Descript This Description	I)	750.00

П	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A OI	for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Ms. Toni Ebeling		Date of Receipt
	Mailing Address 532 First Street Northw Box 68 City	State Zip Code	10 26 2009
	Britt	IA 50423-1227	Transaction ID: 17631364 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Hancock County Memorial Hospital Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	
 3.	Full Name (Last, First, Middle Initial) Mr Joseph LeValley Mailing Address 11111 6th Avenue		Date of Receipt
	Mailing Address 1111 6th Avenue		10 26 2009
	City	State Zip Code	Transaction ID: 17631366
	Des Moines	IA 50314-2611	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Mercy Medical Center-Des Moines	Occupation Senior Vice President Planning	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr Brian Dieter		Date of Receipt
	Mailing Address 3440 Valley View Road	1	10 26 2009
	City	State Zip Code	Transaction ID: 17631367
	Ames FEC ID number of contributing federal political committee.	IA 50014-4613	Amount of Each Receipt this Period 250.00
	Name of Employer Mary Greeley Medical Cent- er	Occupation Vice President and Chief Financial Of	- if
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Г	CURTOTAL of Possints This Page (antional)		750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Ms. Carol E. Twedt Mailing Address 4344 Pine Ridge Trail I	NE		Date of Receipt
	City	State	Zip Code	Transaction ID: 17631378
	lowa City	IA	52240-7830	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Mercy Iowa City	Occupation Director,	on Clinical Information Service	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Ms Joan Bierman			Date of Receipt
	Mailing Address 300 Sioux Valley Drive			10 26 2009
	City	State	Zip Code	Transaction ID: 17631379
	Cherokee	IA	51012-1205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Cherokee Regional Medical Center	Occupation Vice Pre	on sident Finance	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
-).	Full Name (Last, First, Middle Initial) Mr. John E Knox, , FACHE			Date of Receipt
	Mailing Address 350 North Grandview A	Avenue		10 26 YYYY 10 26 2009
	City	State	Zip Code	Transaction ID: 17631380
	Dubuque	IA	52001-6392	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Finley Hospital	Occupation Presiden	on It and Chief Executive Office	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			750.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Douglas E Morse Mailing Address 1000 Fourth Street SV	M.	Date of Receipt
City	State Zip Code	1 0 2 6 2 0 0 9 Transaction ID: 17631381
Mason City	IA 50401-2800	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mercy Medical Center-North Iowa	Occupation Senior Vice President Network and Cli	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Marie E Knedler, , R.N.		Date of Receipt
Mailing Address P O Box 1C	7.0.1	10 26 2009
City	State Zip Code	Transaction ID: 17631382
Council Bluffs	IA 51502-3001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Alegent Health Mercy Hosp- ital	Occupation Vice President and Chief Operating Of	f
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Richard L. Deming, MD		Date of Receipt
Mailing Address 1111 6th Avenue		10 26 2009
City	State Zip Code	Transaction ID: 17631403
Des Moines	IA 50314-2611	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mercy Medical Center-Des Moines	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line number	<u> </u>	

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 178 (check only one) X
or for co	mation copied from such Reports and St mmercial purposes, other than using the E OF COMMITTEE (In Full) rican Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mailir City Grin FEC	ID number of contributing	State IA	Zip Code 50112-1886	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name Grinn Cente Rece	e of Employer rell Regional Medical rept For: Primary General Other (specify)	Occupation Trustee	n Year-to-Date ▼ 250.00	
Mr Ja Mailir	lame (Last, First, Middle Initial) mes Koehler ig Address 3515 Wisconsin Ave			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC	enport ID number of contributing all political committee.	State IA	Zip Code 52806-6762	Transaction ID: 17631405 Amount of Each Receipt this Period 250.00
Gene <u>venp</u>	e of Employer sis Medical Center-Da- ort ipt For: Primary General Other (specify)	Occupation Trustee Aggregate	Year-to-Date ▼ 250.00	
Mr Ro	lame (Last, First, Middle Initial) bert McQuillen g Address 1078 Cedar Ridge Ct.			Date of Receipt 1 0 2 6 2 0 0 9
City Peos	sta ID number of contributing	State IA	Zip Code 52068	Transaction ID: 17631406 Amount of Each Receipt this Period 250.00
	e of Employer y Medical Center-Dubu-	Occupation Trustee	n	
Rece	pt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 250.00	
SUBTO	TAL of Receipts This Page (optional)			750.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicit or for commercial purposes, other than using the name and address of any political committee to solicit contributions from NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Jack Dusenbery Mailing Address 3421 West Ninth Street City Waterloo IA 50702-5499 Date of Receipt Transaction ID: 17 Amount of Each Re FEC ID number of contributing federal political committee. Name of Employer Covenant Medical Center Receipt For: Primary Other (specify) ▼ State Zip Code Transaction ID: 17 Amount of Each Re FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ State Zip Code Transaction ID: 17 Amount of Each Re FEC ID number of contributing federal political committee. Name of Employer General Other (specify) ▼ Cocupation VP of Corporate Communication&Marketin Aggregate Year-to-Date Primary General Other (specify) ▼ Cotupation Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date Primary General Other (specify) ▼ Cotupation Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date Primary General Other (specify) ▼	2 0 0 9 631407
American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Jack Dusenbery Mailing Address 3421 West Ninth Street City State Zip Code IA 50702-5499 FEC ID number of contributing federal political committee. Name of Employer Covenant Medical Center Primary General Other (specify) ▼ City State Zip Code President and Chief Executive Officer Aggregate Year-to-Date Aggregate Year-to-Date Transaction ID: 17 Amount of Each Re Date of Receipt Transaction ID: 17 Amount of Each Re City State Zip Code Transaction ID: 17 Davenport IA 52803-2459 FEC ID number of contributing federal political committee. City City Davenport IA 52803-2459 FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center-Davenport Receipt For: Primary General Other (specify) ▼ Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date Aggregate Year-to-Date Primary General Other (specify) ▼ Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date Aggregate Year-to-Date Primary General Other (specify) ▼ October 10 Date of Receipt Amount of Each Re Transaction ID: 17 Amount of Each Re Primary General Other (specify) ▼ Occupation VP of Corporate Communication&Marketin	2 0 0 9 631407 ceipt this Period
Mailing Address 3421 West Ninth Street City State Zip Code IA 50702-5499 FEC ID number of contributing federal political committee. Name of Employer Covenant Medical Center Primary General Other (specify) ▼ Name (Last, First, Middle Initial) Kenneth Croken Mailing Address 1227 E Rusholme St City State Zip Code Transaction ID: 17 Amount of Each Re Date of Receipt Transaction ID: 17 Amount of Each Re President and Chief Executive Officer Aggregate Year-to-Date ▼ Transaction ID: 17 Date of Receipt Transaction ID: 17 Amount of Each Re Transaction ID: 17 Amount of Each Re Date of Receipt Transaction ID: 17 Amount of Each Re Transaction ID: 17	2 0 0 9 631407 ceipt this Period
City State Zip Code IA 50702-5499 FEC ID number of contributing federal political committee. Name of Employer Covenant Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Kenneth Croken Mailing Address 1227 E Rusholme St City State Zip Code IA 52803-2459 FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center-Davenport FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center-Davenport Receipt For: Primary General Other (specify) ▼ Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date ▼ Transaction ID: 17 Amount of Each Re Transaction ID: 17 Amount of Each Re Transaction ID: 17 Amount of Each Re Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date ▼	2 0 0 9 631407 ceipt this Period
Waterloo IA 50702-5499 Amount of Each Re FEC ID number of contributing federal political committee. Name of Employer Covenant Medical Center Receipt For: Primary General Other (specify) ▼ Pavenport FEC ID number of contributing federal political committee. Pagregate Year-to-Date ▼ Date of Receipt Transaction ID: 17 Amount of Each Re Amount of Each Re Tocupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 17 Amount of Each Re Transaction ID: 17 Transaction ID: 17 Amount of Each Re Transaction ID: 17 Transaction ID: 17	ceipt this Period
FEC ID number of contributing federal political committee. Name of Employer Covenant Medical Center Receipt For: Primary General Other (specify) ▼ Pavenport Name of Employer Covenant Medical Center Receipt For: Primary General Other (specify) ▼ Pavenport FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center-Davenport Receipt For: Primary General Other (specify) ▼ Primary General Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼	
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Kenneth Croken Mailing Address 1227 E Rusholme St City State Zip Code IA 52803-2459 FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center-Davenport Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 17 Amount of Each Re C Ccupation VP of Corporate Communication&Marketin Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	
Receipt For: Primary	
Mailing Address 1227 E Rusholme St City State Zip Code Transaction ID: 17 Davenport IA 52803-2459 FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center-Davenport Receipt Date of Receipt To 2 6 Transaction ID: 17 Amount of Each Receipt Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date ▼ Other (specify) ▼ Date of Receipt Aggregate Year-to-Date ■ 250.00	
City Davenport FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center-Davenport Receipt For: Primary Other (specify) ▼ State Zip Code Transaction ID: 17 Amount of Each Re Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date 250.00	
Davenport IA 52803-2459 Amount of Each Re FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center-Davenport Receipt For: Primary General Other (specify) ▼ Amount of Each Re Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date ▼ 250.00	2009
FEC ID number of contributing federal political committee. Name of Employer Genesis Medical Center-Davenport Receipt For: Primary General Other (specify) ▼ Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date ▼ 250.00	
Name of Employer Genesis Medical Center-Davenport Receipt For: Primary Other (specify) ▼ Occupation VP of Corporate Communication&Marketin Aggregate Year-to-Date 250.00	ceipt this Period
Genesis Medicál Center-Davenport Receipt For: Primary Other (specify) ▼ VP of Corporate Communication&Marketin Aggregate Year-to-Date 250.00	250.00
Primary General Other (specify) ▼ 250.00	
F. II Marco (Lord Flore Middle Letter)	
Full Name (Last, First, Middle Initial) Mr. James Schmerling Date of Receipt	
Mailing Address 1056 East 19th Avenue	2009
City State Zip Code Transaction ID: 17	
Denver CO 80218-1007 Amount of Each Re	ceipt this Period
FEC ID number of contributing federal political committee.	250.00
Name of Employer The Children's Hospital Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)	750.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Michael Ridge CO 80033 6005 FEC ID number of contributing federal political committee. Primary General Other (specifyl) ▼ Full Name (Last, First, Middle Initial) Mailing Address 1400 East Boulder Street City State Zip Code Primary General Other (specifyl) ▼ Full Name (Last, First, Middle Initial) Michael Ridge CO 80099-5533 FEC ID number of contributing federal political committee. City State Zip Code City State Ci	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Mailing Address 8300 West 38th Avenue City State Zip Code Wheat Ridge CO 80033-6005 FEC ID number of contributing federal political committee. Name of Employer State Zip Code President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Larry McEvoy Mailing Address 1400 East Boulder Street City Colorado Springs CO 89999-5533 FEC ID number of contributing federal political committee. City Colorado Springs CO 89999-5533 FEC ID number of contributing federal political committee. City Occupation CEO 89999-5533 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Vicki Darnell Mailing Address 217 S 3rd St. City State Zip Code CEO 89999-5533 FULL Name (Last, First, Middle Initial) Ms. Vicki Darnell Mailing Address 217 S 3rd St. City State Zip Code State Vear-to-Date ▼ Primary General City State Zip Code State City Code State City Code State City City State Zip Code State City City State City City City City City City City City	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Wheat Ridge	Mr. Robert H Malte Mailing Address 8300 West 38th Avenu		10 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer General Context Mailing Address 1400 East Boulder Street CED	-	· .	
Exempla Lutheran Medical Center Receipt For: Primary General Other (specify) ▼	FEC ID number of contributing		
Mr. Larry McEvoy Mailing Address 1400 East Boulder Street City State Zip Code CO 80909-5533 FEC ID number of contributing federal political committee. City Colorado Springs CO 80909-5533 FEC ID number of contributing federal political committee. City Cocupation CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00 Full Name (Last, First, Middle Initial) Ms. Vicki Darnell Mailing Address 217 S 3rd St. City State Zip Code KY 40422-1823 City State Zip Code KY 40422-1823 FEC ID number of contributing federal political committee. Name of Employer Ephraim McDowell Regional Medical Cent Receipt For: Aggregate Year-to-Date ▼ Occupation Vice President and COO Aggregate Year-to-Date ▼ Occupation Vice President and COO Aggregate Year-to-Date ▼ Occupation Vice President and COO Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼	Center Receipt For: Primary General	President and Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	
City State Zip Code CO 80909-5533 FEC ID number of contributing federal political committee. Name of Employer Memorial Health System Full Name (Last, First, Middle Initial) Mailing Address 217 S 3rd St. City State Zip Code KY 40422-1823 City Danville KY 40422-1823 FEC ID number of contributing federal political committee. CEO Date of Receipt Toransaction ID: 17632180 Date of Receipt Toransaction ID: 17632180 City State Zip Code KY 40422-1823 FEC ID number of contributing federal political committee. Name of Employer Ephram McDowell Regional Medical Cent Receipt For: Primary General Occupation Vice President and COO Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	Mr. Larry McEvoy	eet	M M / D D / Y Y Y Y
Colorado Springs CO 80909-5533 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Memorial Health System CEO Receipt For: Primary General Other (specify) ▼ City State Zip Code KY 40422-1823 FEC ID number of contributing federal political committee. City State Zip Code KY 40422-1823 FEC ID number of contributing federal political committee. Name of Employer Aggregate Year-to-Date ▼ Transaction ID: 17632180 Amount of Each Receipt this Period Date of Receipt M	City	State Zip Code	
Name of Employer Memorial Health System CEO	Colorado Springs	CO 80909-5533	
Receipt For:		C	250.00
Receipt For: Primary General 250.00	Name of Employer Memorial Health System	· ·	
Ms. Vicki Darnell Mailing Address 217 S 3rd St. City State Zip Code Danville KY 40422-1823 FEC ID number of contributing federal political committee. Name of Employer Ephraim McDowell Regional Medical Cent Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 17632180 Amount of Each Receipt this Period Transaction ID: 17632180 Amount of Each Receipt this Period 350.00	Primary General	Aggregate Year-to-Date ▼	
Mailing Address 217 S 3rd St. City State Zip Code KY 40422-1823 FEC ID number of contributing federal political committee. Name of Employer Ephraim McDowell Regional Medical Cent Receipt For: Primary General Other (specify) ▼ State Zip Code Transaction ID: 17632180 Amount of Each Receipt this Period 350.00	,		Date of Receipt
City Danville State Zip Code KY 40422-1823 FEC ID number of contributing federal political committee. Name of Employer Ephraim McDowell Regional Medical Cent Receipt For: Primary General Other (specify) ▼ State Zip Code KY 40422-1823 Amount of Each Receipt this Period Occupation Vice President and COO Aggregate Year-to-Date ▼ 350.00			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Ephraim McDowell Regional Medical Cent Receipt For: Primary General Other (specify) Occupation Vice President and COO Aggregate Year-to-Date 350.00	City	State Zip Code	
Name of Employer Ephraim McDowell Regional Medical Cent Receipt For: Primary Other (specify) ▼ Occupation Vice President and COO Aggregate Year-to-Date 350.00	<u>Danville</u>	KY 40422-1823	Amount of Each Receipt this Period
Medical Cent Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		C	350.00
Primary General Other (specify) ▼ 350.00	Medical Cent	Vice President and COO	
SURTOTAL of Passints This Page (astional)	Primary General		
SUBTOTAL of neceipts Tris rage (optional)	SUBTOTAL of Receipts This Page (optional)		850.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 178 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Mary C Carroll Mailing Address 2585 Falmouth Road		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 17632242
	Fairlawn FEC ID number of contributing federal political committee.	OH 44333-4046	Amount of Each Receipt this Period 250.00
	Name of Employer Akron General Health System Receipt For: Primary General Other (specify) ▼	Occupation Trustee Aggregate Year-to-Date 250.00	
В.	Full Name (Last, First, Middle Initial) Mr. Lyndon J Christman Mailing Address 203 Bryn Drive		Date of Receipt 10 26 2009
	City	State Zip Code	Transaction ID: 17632287
	Granville	OH 43023-1503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Fayette County Memorial Hospital Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President Aggregate Year-to-Date 300.00	
с. С.	Full Name (Last, First, Middle Initial) Dr James M Sudimack		Date of Receipt
C.	Mailing Address 2774 Timber Creek Dr	. N	M M / D D / Y Y Y Y Y 1 1 0 2 6 2 0 0 9
	City	State Zip Code	Transaction ID: 17632288
	Cortland FEC ID number of contributing federal political committee.	OH 44410-1756	Amount of Each Receipt this Period 500.00
	Name of Employer Ohio State University Medical Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Trustee Aggregate Year-to-Date 500.00	
	SUBTOTAL of Receipts This Page (optional)		1050.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 178 (check only one) X
0	or for commercial purposes, other than using the	statements may not be sold or used by any personal name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Albert Michaels		Date of Receipt
	Mailing Address 14 Greenbrier Avenue	7: 0.1	10 27 2009
	City <u>Hurricane</u>	State Zip Code WV 25526-9296	Transaction ID: 17632419 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer CAMC Teays Valley Hospital	Occupation President & CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Claudio Fort		Date of Receipt
	Mailing Address 189 Prouty Drive		10 27 2009
	City	State Zip Code	Transaction ID: 17632424
	Newport FEC ID number of contributing federal political committee.	VT 05855-9326	Amount of Each Receipt this Period 350.00
	Name of Employer North Country Hospital and Health Cent	Occupation Chief Executive Officer and Presiden	t
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
. –	Full Name (Last, First, Middle Initial) Ms. Helen R. Strieder		Date of Receipt
	Mailing Address 83 Penniman Place		10 27 2009
	City	State Zip Code	Transaction ID: 17632430
	Brookline FEC ID number of contributing federal political committee.	MA 02445-4135	Amount of Each Receipt this Period 350.00
	Name of Employer New England Baptist Hospi- tal	Occupation Trustee	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Γ	SUBTOTAL of Receipts This Page (optional)		950.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 178 (check only one) X 11a
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any persename and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert A Gundersen Mailing Address 2001 Washington Stree City Braintree FEC ID number of contributing federal political committee.	State Zip Code MA 02184-8658 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Kindred Hospital Northeas- t-Braintree Receipt For: Primary General Other (specify) ▼	Chief Executive Officer Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Patrick Charmel Mailing Address 130 Division Street		Date of Receipt 1 0 2 9 2 0 0 9
City	State Zip Code	Transaction ID: 17649179
Derby	CT 06418-1326	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Griffin Hospital	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Mr. Brian Cournoyer		Date of Receipt
Mailing Address 110 Barnes Road		10 29 2009
City	State Zip Code	Transaction ID: 17649192
Wallingford	CT 06492-1802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Manager, Government Relations Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 178 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Mary Lyon		Date of Receipt
Mailing Address 12 Wildlife Drive		10 29 2009
City	State Zip Code	Transaction ID: 17649193
Wallingford	CT 06492-5346	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Connecticut Hospital Asso- ciation	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Allan Pinard		Date of Receipt
Mailing Address 110 Barnes Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17649195
Wallingford	CT 06492-1802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Connecticut Hospital Asso- ciation	Occupation Assistant Vice President, Finance	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Ms. Leslie Gianelli		Date of Receipt
Mailing Address 110 Barnes Road		10 29 7 2009
City	State Zip Code	Transaction ID: 17649196
Wallingford	CT 06492-1802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Connecticut Hospital Asso- ciation	Occupation Director, Communications	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
		1050.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∆ .	Full Name (Last, First, Middle Initial) Mr. Clarence J Silvia Mailing Address 81 Meriden Avenue City Southington FEC ID number of contributing federal political committee. Name of Employer Bradley Memorial	State CT C Occupation President	Zip Code 06489-3268	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
З.	Full Name (Last, First, Middle Initial) Mr J. Kevin Kinsella Mailing Address P O Box 5037			Date of Receipt 10 29 2009
	City Hartford	State CT	Zip Code	Transaction ID: 17649198
	FEC ID number of contributing federal political committee.	C	06102-5037	Amount of Each Receipt this Period 350.00
	Name of Employer Hartford Hospital	Occupation Vice Pres		
	Receipt For: Primary General Other (specify) ▼	. '	Year-to-Date ▼ 350.00	
-).	Full Name (Last, First, Middle Initial) Mr. Peter D. Freytag			Date of Receipt
	Mailing Address 151 West Oak Hills Drive			10 29 2009
	City	State	Zip Code	Transaction ID: 17649199
	Castle Rock	CO	80108-9260	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Bristol Hospital	Occupation Interim C	n hief Financial Officer	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]
	SUBTOTAL of Receipts This Page (optional)			1200.00
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 178 (check only one) X 11a
A 0	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Robert J Trefry		Date of Receipt
•	Mailing Address P O Box 5000		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Bridgeport	State Zip Code CT 06610-0120	Transaction ID: 17649200 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Bridgeport Hospital	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Dr. Jane Deane Clark, PhD Mailing Address 110 Barnes Road		Date of Receipt
		7. 0	10 29 2009
	City Wallingford	State Zip Code CT 06492-1802	Transaction ID: 17649236
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
	Name of Employer Connecticut Hospital Asso- ciation	Occupation Senior Director, Healthcare Data	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. James D. lacobellis		Date of Receipt
	Mailing Address 110 Barnes Road		10 29 2009
	City Wallingford	State Zip Code CT 06492-1802	Transaction ID: 17649237
	FEC ID number of contributing federal political committee.	C1 00492-1002	Amount of Each Receipt this Period 500.00
	Name of Employer Connecticut Hospital Asso- ciation	Occupation Vice President, Government Relations	s
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Γ	SUBTOTAL of Receipts This Page (optional)		1500.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any pe name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Robert Gerard Kiely Mailing Address 28 Crescent Street		Date of Receipt
		State Zip Code	10 29 2009
	City <u>Middletown</u>	CT 06457-3654	Transaction ID: 17649238 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Middlesex Hospital	Occupation President and Chief Executive Office	cer
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Ms. Kimberley K. Hostetler Mailing Address 31 Prospect Place		Date of Receipt
	Mailing Address 31 Prospect Place		10 29 7 7 7 7 7
	City Bristol	State Zip Code CT 06010-5045	Transaction ID: 17649239
	FEC ID number of contributing federal political committee.	CT 06010-5045	Amount of Each Receipt this Period 500.00
	Name of Employer Connecticut Hospital Asso- ciation	Occupation Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
_ С.	Full Name (Last, First, Middle Initial) Ms. Lucille A Janatka		Date of Receipt
	Mailing Address 435 Lewis Avenue		10 29 2009
	City Meriden	State Zip Code CT 06451-2101	Transaction ID: 17649240
	FEC ID number of contributing federal political committee.	CT 06451-2101	Amount of Each Receipt this Period 500.00
	Name of Employer MidState Medical Center	Occupation President and Chief Executive Office	cer
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		1500.00
	TOTAL This Period (last page this line number		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 178 (check only one) X 11a
A oi	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
٠.	Full Name (Last, First, Middle Initial) Mr. John H Tobin		Date of Receipt
	Mailing Address 64 Robbins Street		10 29 2009
	City Waterbury	State Zip Code CT 06708-2600	Transaction ID: 17649265 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Waterbury Hospital	Occupation President and Chief Executive Officer	-
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Stephen A. Frayne	D	Date of Receipt
	Mailing Address 411 Old Sherman Hill	10 29 2009	
	City	State Zip Code	Transaction ID: 17649266
	Woodbury FEC ID number of contributing federal political committee.	CT 06798-4003	Amount of Each Receipt this Period 500.00
	Name of Employer Connecticut Hospital Asso- ciation	Occupation Senior Vice President, Health Policy	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Dr. Joel R. Reich		Date of Receipt
	Mailing Address 71 Haynes Street		10 29 7 2009
	City	State Zip Code CT 06040-4131	Transaction ID: 17649267
	Manchester FEC ID number of contributing federal political committee.	CT 06040-4131	Amount of Each Receipt this Period 500.00
	Name of Employer Eastern Connecticut Health Network	Occupation Senior Vice President Medical Affairs	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Γ,	CURTOTAL of Possints This Page (antional)		1500.00

ormation copied from such Reports and Sommercial purposes, other than using the ME OF COMMITTEE (In Full) Iterican Hospital Association PAC Name (Last, First, Middle Initial) Marna P Borgstrom ling Address 20 York Street W Haven C ID number of contributing eral political committee. In e of Employer ender Haven Hospital Reipt For: Primary General Other (specify) Name (Last, First, Middle Initial) Christopher M Dadlez	Statements may not be sold or used by any person and address of any political committee to a state State	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name (Last, First, Middle Initial) Marna P Borgstrom ling Address 20 York Street W Haven C ID number of contributing eral political committee. ne of Employer e-New Haven Hospital seipt For: Primary General Other (specify) Name (Last, First, Middle Initial)	CT 06510-3220 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	Transaction ID: 17649268 Amount of Each Receipt this Period 1000.00
Marna P Borgstrom ling Address 20 York Street W Haven C ID number of contributing eral political committee. ne of Employer e-New Haven Hospital seipt For: Primary General Other (specify) Name (Last, First, Middle Initial)	CT 06510-3220 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	Transaction ID: 17649268 Amount of Each Receipt this Period 1000.00
w Haven C ID number of contributing eral political committee. ne of Employer e-New Haven Hospital seipt For: Primary General Other (specify)	CT 06510-3220 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	Transaction ID: 17649268 Amount of Each Receipt this Period 1000.00
w Haven C ID number of contributing eral political committee. ne of Employer e-New Haven Hospital reipt For: Primary General Other (specify) Name (Last, First, Middle Initial)	CT 06510-3220 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	Amount of Each Receipt this Period 1000.00
C ID number of contributing eral political committee. The of Employer e-New Haven Hospital reipt For: Primary General Other (specify) Name (Last, First, Middle Initial)	Occupation President and Chief Executive Officer Aggregate Year-to-Date 1000.00	1000.00
eipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial)	President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	
Primary General Other (specify) ▼ Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼	
	1	Date of Breedy
•		Date of Receipt
ling Address 114 Woodland Street		10 29 7 2009
	State Zip Code	Transaction ID: 17649269
rtford	CT 06105-1208	Amount of Each Receipt this Period
	C	1000.00
ne of Employer nt Francis Care, Inc.	Occupation President and Chief Executive Officer	
eipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 1000.00	
		Date of Receipt
ling Address Brewster Road		10 29 7 4 4 9
	State Zip Code	Transaction ID: 17649270
	CT 06011	Amount of Each Receipt this Period
	C	500.00
	Occupation President and Chief Executive Officer	
eipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
OTAL of Receipts This Page (optional) .		2500.00
	rtford C ID number of contributing eral political committee. me of Employer nt Francis Care, Inc. ceipt For: Primary General Other (specify) Name (Last, First, Middle Initial) Kurt A Barwis, , CHE, CPA ling Address Brewster Road C ID number of contributing eral political committee. me of Employer stol Hospital ceipt For: Primary General Other (specify) General Other (specify) General Other (specify)	State Zip Code cTford CT 06105-1208 C ID number of contributing eral political committee. The of Employer of Employer of Company

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for e	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 117 / 178 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be name and address of	sold or used by any perso fany political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Frank J Kelly Mailing Address 24 Hospital Avenue City Danbury FEC ID number of contributing federal political committee. Name of Employer Danbury Hospital	CT 06	p Code 6810-6099 Chief Executive Office	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	500.00	
Full Name (Last, First, Middle Initial) Mr. Christopher Hartley Mailing Address 114 woodland Street			Date of Receipt 1 0 2 9 2 0 0 9
City		p Code	Transaction ID: 17649272
<u>Hartford</u>	CT 06	6105-1208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Saint Francis Hospital and Medical Cen Receipt For:	Occupation Sr Vice Preside Aggregate Year-to	-	
Primary General Other (specify) ▼	Aggregate rear-to	500.00]
Full Name (Last, First, Middle Initial) Ms Laura J. Hanten Jordan			Date of Receipt
Mailing Address 49 Oxford St			10 29 2009
City		p Code	Transaction ID: 17649273
<u>Hartford</u>	<u>CT 06</u>	6105-2915	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Connecticut Hospital Asso- ciation	Occupation VP, Patient Car		
Receipt For: Primary General Other (specify)	Aggregate Year-to	500.00	
SUBTOTAL of Receipts This Page (optional)			1500.00

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 178 (check only one) X
or for c	ormation copied from such Reports and St ommercial purposes, other than using the ME OF COMMITTEE (In Full) erican Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
. Den	Name (Last, First, Middle Initial) unis P MC Conville ling Address 80 Chilstone Lane	State	Zip Code	Date of Receipt 10 29 2009 Transaction ID: 17649276
-	nchester	CT	06040-5651	Amount of Each Receipt this Period
	CID number of contributing eral political committee.	С		350.00
<u>Net</u>	ne of Employer stern Connecticut Health work seipt For: Primary General Other (specify)		n rategic/Operational Planning Year-to-Date ▼ 350.00	
. Ms	Name (Last, First, Middle Initial) Kyle Ballou ling Address 20 York Street			Date of Receipt
City	,	State	Zip Code	1 0 2 9 2 0 0 9 Transaction ID: 17649277
•	w Haven	CT	06510-3220	Amount of Each Receipt this Period
FEC	C ID number of contributing eral political committee.	C		350.00
Nan Yale	ne of Employer e-New Haven Hospital	Occupation Administ	n rative Director Community 8	
Rec	eipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00]
. <u>Dr</u> S	Name (Last, First, Middle Initial) Steven D Hanks, , M.D.			Date of Receipt
Mai	ling Address P O Box 100			10 29 2009
City		State	Zip Code	Transaction ID: 17649278
<u>Ne</u>	w Britain	CT	06050-0100	Amount of Each Receipt this Period
	CID number of contributing eral political committee.	C		350.00
<u>tal</u>	ne of Employer v Britain General Hospi-		ice President Medical Affairs	
Rec	eipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
CUPT	OTAL of Receipts This Page (optional)			1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personne name and address of any political committee to s	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr William Roe Mailing Address 25 River Road Apt. 6106		Date of Receipt
City Wilton FEC ID number of contributing federal political committee.	State Zip Code CT 06897-4068	Transaction ID: 17649279 Amount of Each Receipt this Period 350.00
Name of Employer Danbury Hospital Receipt For: Primary General Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Gerald J Boisvert Mailing Address 282 Washington Stre	pet	Date of Receipt 1 0 2 9 2 0 0 9
City	State Zip Code	Transaction ID: 17649280
Hartford FEC ID number of contributing federal political committee.	CT 06106-3322	Amount of Each Receipt this Period 350.00
Name of Employer Connecticut Children's Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Vice President and Chief Financial Off Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Mr. William Stanley		Date of Receipt
Mailing Address 292 Pequot Avenue		10 29 2009
City New London	State Zip Code CT 06320-4451	Transaction ID: 17649281
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer Lawrence & Memorial Hospi- tal Receipt For:	Occupation Vice President, Development	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		950.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Julia A. Petrellis Mailing Address 329 Round Hill Road City Bristol FEC ID number of contributing federal political committee. Name of Employer Connecticut Hospital Association Receipt For: Primary General	State Zip Code CT 06010-9021 C Occupation Director, Quality Improvement Aggregate Year-to-Date ▼	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Kevin Reynolds Mailing Address 280 Steele Road City West Hartford FEC ID number of contributing federal political committee. Name of Employer Saint Francis Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code CT 06117-2743 C Occupation Trustee Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Mary Ann Hanley Mailing Address 349 East Street City Hebron FEC ID number of contributing federal political committee. Name of Employer Saint Francis Hospital and Medical Cen Receipt For: Primary General Other (specify)	State Zip Code CT 06248-1102 C Occupation Administrator, Liaison Office Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M / 29 / 2009 Transaction ID: 17649284 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 178 (check only one) X 11a 11b 11c 12
	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Kathleen Roche		Date of Receipt
Mailing Address 114 Woodland Street City	State Zip Code	1 0 2 9 2 0 0 9 Transaction ID: 17649285
Hartford	CT 06105-1208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Francis Hospital and Medical Cen	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Jeffrey A Chitester		Date of Receipt
Mailing Address 40 W Hill Dr		10 29 7 2009
City	State Zip Code	Transaction ID: 17649312
West Hartford FEC ID number of contributing federal political committee.	CT 06119-1347	Amount of Each Receipt this Period 250.00
Name of Employer Saint Francis Hospital and Medical Cen	Occupation Senior VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr David Borgert	1	Date of Receipt
Mailing Address 1428 Poppy Rd		10 29 7 2009
City	State Zip Code	Transaction ID: 17649574
Saint Cloud	MN 56303-0627	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer CentraCare Health System	Occupation Director, Government Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	1	850.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one PAGE 122/1/8		
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Hospital Association PA		,,,			
Full Name (Last, First, Middle Initial) Martin G Oscaoal			Date of Receipt		
City Edgewood	State KY	Zip Code 41017-5401	Transaction ID: 17651989 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		350.00		
Name of Employer St. Elizabeth Medical Center-North Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		an Resources Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial) Dr. Catherine M. DeVet Mailing Address 281 Rolling Hills La	ane		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City					
Petoskey FEC ID number of contributing federal political committee.	C	49770-9602	Amount of Each Receipt this Period 350.00		
Name of Employer Northern Michigan Regional Hospital Receipt For: Primary General Other (specify) ▼	Occupation Administ Aggregate				
Full Name (Last, First, Middle Initial) Mr. Robert G Norton, , CHE Mailing Address 81 Highland Avenu	ıe		Date of Receipt		
City	State	Zip Code	1 0 1 3 2 0 0 9 Transaction ID: 17695911		
Salem	MA	01970-2768	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		650.00		
Name of Employer North Shore Medical Center	Occupation Presiden	n t and Chief Executive Officer			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00			
SUBTOTAL of Receipts This Page (optional	al)		1350.00		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 178 (check only one) X
4	or for commercial purposes, other than using the	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Paul Betz, , FACHE		Date of Receipt
	Mailing Address 3024 Stadium Boulev	ard	10 16 2009
	City <u>Jonesboro</u>	State Zip Code AR 72401-7493	Transaction ID: 17700763
	FEC ID number of contributing federal political committee.	C 72401-7493	Amount of Each Receipt this Period 227.50
	Name of Employer NEA Baptist Memorial Hosp- ital	Occupation CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
- 3.	Full Name (Last, First, Middle Initial) Mr. Roger M. Busfield Mailing Address 419 Natural Resource	on Dr	Date of Receipt
	walling Address 419 Natural Resource	10 16 2009	
	City Little Rock	State Zip Code AR 72205-1576	Transaction ID: 17700772
	FEC ID number of contributing federal political committee.	C 72203-1370	Amount of Each Receipt this Period 325.00
	Name of Employer Arkansas Hospital Associa- tion	Occupation President Emeritus	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
_	Full Name (Last, First, Middle Initial) Michael J. Rock		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		10 30 7 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: 17701576 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Associate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .	I	902.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek R City Langhorne FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	State Zip Code PA 19047-2306 C Occupation Vice President, Human Resources Aggregate Year-to-Date 230.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane City Livingston FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	State Zip Code NJ 07039-2750 C Occupation Vice President Continuing Care Service Aggregate Year-to-Date 205.00	Date of Receipt M M J J J J J J J J J J J J J J J J J
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mount City New Hope FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	State Zip Code PA 18938-5760 C Occupation Sr. VP., Health Economics Aggregate Year-to-Date 314.20	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	al)	165.42

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 178 (check only one) X
A	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs			Date of Receipt
	Mailing Address 23 E. Delaware Avenue	Э		10 30 7 9 9
	City	State NJ	Zip Code	Transaction ID: 17701999
	Pennington FEC ID number of contributing federal political committee.	C	08534-2302	Amount of Each Receipt this Period 5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation General C	Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	
	Full Name (Last, First, Middle Initial) Ms. Katie Vaughan			Date of Receipt
	Mailing Address 506A East Howell Avenue			10 31 2009
	City	State	Zip Code	Transaction ID: PR1034595122983
	Alexandria	VA	22301-1216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Associate	Director	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		71.0	10 31 2009
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR1045726222983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2007.2010	78.00
	Name of Employer American Hospital Associa- tion-Washingt		ce President & General Cou	unse
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 819.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			123.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 126 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 11
C	any information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Ms. Sarah Berk Mailing Address 325 Seventh Street N	N.	Date of Receipt
	Suite 700		10 31 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR1082532722983
	FEC ID number of contributing federal political committee.	C 20004-2818	Amount of Each Receipt this Period 38.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	P/R Deduction (\$19.00 Bi- Weekly)
-	Full Name (Last, First, Middle Initial) Ms. Barbara Jellen		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	10 31 7 2009	
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR1113464222983
	FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Section Director, Constituency Section	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 294.00	P/R Deduction (\$14.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. Davon Gray		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N	10 31 2009
	City	State Zip Code DC 20004-2818	Transaction ID: PR1143013022983
	Washington FEC ID number of contributing federal political committee.	C 20004-2818	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Legislative Assistant	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		94.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 1
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Mary Meadows		Date of Receipt
	Mailing Address One North Franklin		10 31 2009
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1260472922983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General	Occupation Director of Professional Practice, AON Aggregate Year-to-Date ▼	
	Other (specify)	294.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Michelle M. Mathy		Date of Receipt
	Mailing Address 506A Howell	10 31 2009	
	City	State Zip Code	Transaction ID: PR1300853722983
	Alexandria	VA 22301-1216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Project Manager AHAPAC Coordinator	- r
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	294.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Stephen Mayfield		Date of Receipt
	Mailing Address One North Franklin St Suite 32139	reet	10 31 7 2009
	City	State Zip Code	Transaction ID: PR1302378922983
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	86.96
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 782.64	P/R Deduction (\$43.48 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		142.96

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 178 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. James Wadzinski		Date of Receipt
	Mailing Address One North Franklin		10 31 2009
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1347703422983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President Account Services	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1070.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay		Date of Receipt
	Mailing Address One North Franklin		10 31 YYYY 2009
	City	State Zip Code	Transaction ID: PR1347703622983
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President & CIO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 420.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Susan Gergely		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347791022983
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director of Operations, AONE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	<u> </u>	108.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. John Slotman		Date of Receipt
Mailing Address 325 Seventh Street, Suite 700	NW	10 31 7 2009
City Washington	State Zip Code DC 20004-2802	Transaction ID: PR1384065322983 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer American Hospital Association-Washingt Receipt For: Primary Other (specify) ▼	Occupation Associate Director, Federal Relations Aggregate Year-to-Date 819.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Ms. Stephanie H. Drake Mailing Address One North Franklin		Date of Receipt
	01-11- 7'- 0 -11-	10 31 2009
City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1492459922983 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary Other (specify) ▼	Occupation Associate Executive Director - ASHHI Aggregate Year-to-Date ▼ 420.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial)		2
Ms. Monica D Day Mailing Address 10224 Prince Place	‡ 205	Date of Receipt 1 0 3 1 2 0 0 9
City	State Zip Code	Transaction ID: PR1516850622983
Largo FEC ID number of contributing federal political committee.	MD 20774-1210	Amount of Each Receipt this Period 29.18
Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify) ▼	Occupation Political Affairs Coordinator Aggregate Year-to-Date ▼ 277.21	P/R Deduction (\$14.59 Bi-Weekly)
CURTOTAL of Possints This Page (antional)		147.18

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Elisa Arespacochaga		Date of Receipt
Mailing Address One North Franklin		10 31 7 2009
City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1555656222983 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.44
Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify) ▼	Occupation Associate Direcor, Constituency Section Aggregate Year-to-Date ▼ 273.96	P/R Deduction (\$15.22 Bi-Weekly)
Full Name (Last, First, Middle Initial) Mr. Clinton S. Manning		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700		10 31 7 2009
City Washington	State Zip Code DC 20004-2802	Transaction ID: PR1555656522983
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 30.44
Name of Employer American Hospital Associa- tion-Washingt	Occupation Asst. Director Advocacy & Member Co	ommu
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 273.96	P/R Deduction (\$15.22 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Kathy Poole		Date of Receipt
Mailing Address One North Franklin		10 31 2009
City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1589439922983 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	31.82
Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General Other (specify) ▼	Occupation Director, Governance Projects Aggregate Year-to-Date ▼ 270.45	P/R Deduction (\$15.91 Bi- Weekly)
CURTOTAL of Possints This Page (antional)		92.70

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 178 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
, <u>, , , , , , , , , , , , , , , , , , </u>	Full Name (Last, First, Middle Initial) Ms. Linda Fishman			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W		10 31 2009
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR327629122983
	FEC ID number of contributing federal political committee.	C	20004-2010	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify)	, '	ce President, Public Policy Year-to-Date 819.00	P/R Deduction (\$39.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner			Date of Receipt
	Mailing Address 11004 Petersborough Drive			10 31 2009
	City	State	Zip Code	Transaction ID: PR327745922983
	Rockville	MD	20852-3249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa-	Occupation	n Grassroots Advocacy	
	tion-Washingt Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	33 13	819.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Michael P. McCue			Date of Receipt
	Mailing Address 122 N. Greenwood Av	enue		10 31 2009
	City	State	Zip Code	Transaction ID: PR327771622983
	Park Ridge	IL	60068-3227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Associate	e Director	
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 294.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			184.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	for e	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 132 / 178 (check only one) X
A 0	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be name and address of	sold or used by any personal solution solution solutions and political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u></u>	Full Name (Last, First, Middle Initial) Ms. Suzanne R. Sonik			Date of Receipt
	Mailing Address One North Franklin			10 31 / 2009
	City Chicago		p Code 0606-3436	Transaction ID: PR327777222983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Long-		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 294.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock			Date of Receipt
	Mailing Address 1022 S. Harvey Avenue			10 31 2009
	City	'	p Code	Transaction ID: PR327777822983
	Oak Park	<u>IL 60</u>	0304-2132	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President,	Member Relations	
	Receipt For:	Aggregate Year-te	o-Date ▼	
	Primary General Other (specify) ▼	0 0 0 0	420.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele	1		Date of Receipt
	Mailing Address 1003 Kimberly Place			10 31 2009
	City	State Zi	p Code	Transaction ID: PR327801722983
	Great Falls	VA 22	2066-1546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 420.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ.	SUBTOTAL of Receipts This Page (optional) .			108.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700		10 31 7 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR327812022983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 2000+2010	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Chief Executive Officer, AONE	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 819.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis		Date of Receipt
	Mailing Address 6034 North 22nd Stree	t	10 31 2009
	City	State Zip Code	Transaction ID: PR327831722983
	Arlington FEC ID number of contributing federal political committee.	VA 22205-3408	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Regional Executive	1
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 420.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan		Date of Receipt
	Mailing Address One North Franklin Str	eet	10 31 YYYY 2009
	City	State Zip Code	Transaction ID: PR327846222983
	Chicago FEC ID number of contributing federal political committee.	IL 60606	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Meetings & Travel Ser	v
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	P/R Deduction (\$14.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)	<u> </u>	146.00

ITEMIZED RE		monts may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 1 (check only one) X	l 78 ☐ 1
or for commercial purp	oses, other than using the nam	ne and addi	ress of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.	
Full Name (Last, F Ms. Ellen A. Pryga				Date of Receipt	
Mailing Address	2401 Calvert Street, NW Apt. 1008			10 31 7 2009	
City <u>Washington</u>		State DC	Zip Code 20008-2614	Transaction ID: PR32785192298 Amount of Each Receipt this Period	3
FEC ID number of federal political cor		С		40.00	
Name of Employer American Hospital tion-Washingt Receipt For: Primary Other (speci	General		Policy Development Year-to-Date ▼ 420.00	P/R Deduction (\$20.00 Bi-Weekly)	
	325 Seventh Street, NW			Date of Receipt	
City	Suite 700	State	Zip Code	1 0 3 1 2 0 0 9 Transaction ID: PR32785802298	
Washington		DC	20004-2818	Amount of Each Receipt this Period	
FEC ID number of federal political cor		С		78.00	
Name of Employer American Hospital tion-Washingt Receipt For: Primary Other (speci	General		ident, Political Affairs Year-to-Date ▼ 819.00	P/R Deduction (\$39.00 Bi-Weekly)	
Full Name (Last, F Mr. John F. Barry	rst, Middle Initial)			Date of Receipt	
	One North Franklin			1 0 3 1 2 0 0 9	
City		State	Zip Code	Transaction ID: PR32787782298	3
Millis FEC ID number of federal political cor		MA C	60606-3436	Amount of Each Receipt this Period 78.00	
Name of Employer American Hospital tion-Chicago			Executive		
Receipt For: Primary Other (speci	General	Aggregate	Year-to-Date ▼ 819.00	P/R Deduction (\$39.00 Bi- Weekly)	
SUBTOTAL of Rece	ipts This Page (optional)			196.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 178 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any persename and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. George F. Bergstrom		Date of Receipt
Mailing Address 130 North Garland Co #3002		10 31 2009
Chicago	State Zip Code IL 60602-4750	Transaction ID: PR327895722983
Chicago	IL 60602-4750	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	420.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Judy Williams	<u>I</u>	Date of Receipt
Mailing Address One North Franklin Str	reet	10 31 2009
City	State Zip Code	Transaction ID: PR327918922983
Chicago	IL 60606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Director Membership	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	294.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Richard J. Umbdenstock	l	Date of Receipt
Mailing Address 325 Seventh Street, N' Suite 700	W	10 31 2009
City	State Zip Code	Transaction ID: PR328132822983
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation President and Chief Executive Office	er
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	819.00	P/R Deduction (\$39.00 Bi- Weekly)
OUDTOTAL of Descript This Days (self-self)	<u> </u>	146.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 / 178 (check only one) X
0	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach		Date of Receipt
	Mailing Address 204 7th Ave		10 31 2009
	City La Grange	State Zip Code IL 60525-6406	Transaction ID: PR328136922983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Member Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	819.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Lauren A. Barnett		Date of Receipt
	Mailing Address One North Franklin St	10 31 2009	
	City	State Zip Code	Transaction ID: PR328174922983
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, SHSMD	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	294.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
	Mailing Address 5545 North Wayne		10 31 2009
	City	State Zip Code	Transaction ID: PR328223822983
	Chicago	IL 60640-1318	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 819.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ.	SURTOTAL of Receipts This Page (ontional)		184.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 178 (check only one) X
Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Dr. James D. Bentley, Ph.D.		Date of Receipt
Mailing Address 13106 Vingle Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR328224922983
Silver Spring	MD 20906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	819.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
Mailing Address 1093 N. Faldo Way		10 31 2009
City	State Zip Code	Transaction ID: PR328241422983
Eagle	ID 83616-5369	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	420.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack		Date of Receipt
Mailing Address 3475 North Venice Stre	eet	10 31 7 2009
City	State Zip Code	Transaction ID: PR328260922983
Arlington	VA 22207-4446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary ☐ General Other (specify) ▼	819.00	P/R Deduction (\$39.00 Bi- Weekly)
CURTOTAL of Pagainte This Paga (antional)		196.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 178 (check only one) X 11a
A o	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may name and add	not be sold or used by any persor ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Mr. Richard H. Wade			Date of Receipt
	Mailing Address 1221 Cavalier Road City	State	Zip Code	1 0 3 1 2 0 0 9 Transaction ID: PR328310422983
	Arnold	MD	21012-2126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General		ce President Strategic Comi Year-to-Date ▼	mun P/R Deduction (\$39.00 Bi-
	Other (specify)	0 0	819.00	Weekly)
	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		10 31 7 2009
	City	State	Zip Code	Transaction ID: PR328341822983
	Washington FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Washingt		Political Action & Grassroot	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 819.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		7. 0. 1	10 31 2009
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR328490122983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20004-2010	20.00
	Name of Employer American Hospital Associa- tion-Washingt		ssociate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$10.00 Bi- Weekly)
\[SUBTOTAL of Receipts This Page (optional)			176.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER: PAGE 139 / 178 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be name and address of	e sold or used by any persof any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina			Date of Receipt
	Mailing Address 200 Clover Hill Court			10 31 YYYYY 10 31
	City		ip Code	Transaction ID: PR328511822983
	Yardley	<u>PA 1</u>	9067-5736	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Exec	utive	
	Receipt For:	Aggregate Year-t		
	Primary General Other (specify) ▼		819.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell			Date of Receipt
	Mailing Address 1501 N. Harrison Street	et		10 DD / YYYY 10 31 2009
	City		ip Code	Transaction ID: PR328512022983
	Arlington	<u>VA 2</u>	2205-2726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President	, Media Relations	
	Receipt For:	Aggregate Year-t	to-Date ▼	
	Primary General Other (specify) ▼	0 0 0 0	420.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. George Arges			Date of Receipt
	Mailing Address One North Franklin St			10 31 7 2009
	City	State Z	ip Code	Transaction ID: PR328641122983
	Chicago	IL 6	0606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.46
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Director	r, Health Data Manage	em en
	Receipt For:	Aggregate Year-t	to-Date ▼	_
	Primary General Other (specify) ▼		386.35	P/R Deduction (\$22.73 Bi- Weekly)
Г	SUBTOTAL of Receipts This Page (optional)	l		163.46

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 140 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Ar	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
 	Full Name (Last, First, Middle Initial) Mr. Anthony J. Burke			Date of Receipt
	Mailing Address One North Franklin Ave	e. State	Zip Code	1 0 3 1 2 0 0 9 Transaction ID: PR328913322983
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		88.00
	Name of Employer American Hospital Associa- tion Receipt For:		n t & CEO, AHA Solutions, Inc y Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	792.00	P/R Deduction (\$44.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey			Date of Receipt
	Mailing Address One North Franklin Stre	10 31 2009		
	City	State	Zip Code	Transaction ID: PR329013422983
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation SPSA Di	rector	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD			Date of Receipt
	Mailing Address One North Franklin			10 31 2009
	City	State	Zip Code	Transaction ID: PR329071322983
	Chicago	IL	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		78.00
	Name of Employer American Hospital Associa- tion-Chicago		t & Chief Operating Officer, (
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 819.00	P/R Deduction (\$39.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			206.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may not be sold or used by any per name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		10 31 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR329084422983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General	Occupation Senior Associate Director Aggregate Year-to-Date	P/R Deduction (\$20.00 Bi-
	Other (specify) ▼	420.00	Weekly)
	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese Mailing Address 500 Interstate Bouleva	urd South	Date of Receipt
	City	1 0 3 1 2 0 0 9 Transaction ID: PR329215722983	
	Nashville	State Zip Code TN 37210-4634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation AHA Regional Executive	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 819.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. John Evans		Date of Receipt
	Mailing Address One North Franklin St	reet	10 31 2009
	City	State Zip Code	Transaction ID: PR329342622983
	Chicago FEC ID number of contributing federal political committee.	L 60606	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Vice President & CFO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	P/R Deduction (\$14.00 Bi-Weekly)
Γ.	SUBTOTAL of Receipts This Page (optional)	<u> </u>	146.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 142 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris		Date of Receipt
	Mailing Address 1136 W. Farwell Ave.		10 31 2009
	City Chicago	State Zip Code IL 60626-3861	Transaction ID: PR329654222983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General	Occupation Executive Director, ASDVS Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	294.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Patricia Meersman		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330343322983
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Director Member Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	420.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330411622983
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Associate Regional Executive	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		108.00

Π	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS ny information copied from such Reports and Si	tatemente ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 178 (check only one) X
5	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	name and add	dress of any political committee to	o solicit contributions from such committee.
∠ \ .	Full Name (Last, First, Middle Initial) Ms. Maureen D. Mudron	.,		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	/V		10 31 2009
	City	State	Zip Code	Transaction ID: PR330465222983
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Deputy C	n General Counsel	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		294.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca			Date of Receipt
-	Mailing Address 4960 138th Cricle Wes	st		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR330475422983
	Apple Valley	MN	55124-9229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Regional	n Executive	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		819.00	P/R Deduction (\$39.00 Bi- Weekly)
 ;.	Full Name (Last, First, Middle Initial) Ms. Jennifer E. Mallard			Date of Receipt
	Mailing Address 6109 North 9th Road			10 31 7 2009
	City	State	Zip Code	Transaction ID: PR330534322983
	Arlington	VA	22205-1609	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Senior A	n ssociate Director	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D D - 1 - 1' (\$22.22.22)
	Other (specify)		420.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)	l		146.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 178 (check only one) X 11a
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
. 2	Full Name (Last, First, Middle Initial)		
Α.	Mr. Gene O'Dell Mailing Address One North Franklin		Date of Receipt 1 0 3 1 2 0 0 9
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR330547722983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Strategic Planning Aggregate Year-to-Date ▼ 420.00	P/R Deduction (\$20.00 Bi-Weekly)
_ В.	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe Mailing Address 172 Atteridge		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330549222983
	Lake Forest FEC ID number of contributing federal political committee.	IL 60045-1715	Amount of Each Receipt this Period 94.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify)	Occupation Vice President, Constituency Section Aggregate Year-to-Date ▼ 771.00	P/R Deduction (\$47.00 Bi-Weekly)
_ D.	Full Name (Last, First, Middle Initial) Mr. Walter James Reiter Mailing Address 325 Seventh Street, N	N	Date of Receipt
	Suite 700		10 31 2009
	City <u>Washington</u>	State Zip Code DC 20004-2818	Transaction ID: PR330776122983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼	Occupation V.P., Advocacy & Member Communic Aggregate Year-to-Date ▼ 420.00	P/R Deduction (\$20.00 Bi-Weekly)
	SUBTOTAL of Receipts This Page (optional)		174.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq.		Date of Receipt
	Mailing Address 1101 N. Kentucky Stre		10 31 2009
	City Arlington	State Zip Code VA 22205-3515	Transaction ID: PR331278822983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 22203-3313	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, State Issues Forum	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	P/R Deduction (\$14.00 Bi- Weekly)
 3.	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush		Date of Receipt
	Mailing Address 26 West Glendale Ave).	10 31 2009
	City	State Zip Code	Transaction ID: PR331304222983
	Alexandria	VA 22301-2402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director Advocacy and Public Policy (Op
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 420.00	P/R Deduction (\$20.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Jo Ann Webb		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		10 31 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR331379122983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 20004-2018	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Director Federal Relations & Polic	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		96.00

ITI	EMIZED RECEIPTS	totomonto mo	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 178 (check only one) X
or f	y information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	name and add	dress of any political committee to	o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms. Judy Weinsheimer			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N		10 31 2009
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR331386922983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify)	1	ssociate Director Year-to-Date 294.00	P/R Deduction (\$14.00 Bi-Weekly)
3.	Full Name (Last, First, Middle Initial) Mr. Alex R. White, Sr. Mailing Address PO Box 15587			Date of Receipt 1 0 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: PR331416022983
	Austin FEC ID number of contributing federal political committee.	C	78761-5587	Amount of Each Receipt this Period 116.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General Other (specify) ▼	, '	Executive Year-to-Date 1218.00	P/R Deduction (\$58.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Mr. Donald May			Date of Receipt
	Mailing Address 521 Great Falls St.			10 7 31 7 2009
	City Falls Church	State VA	Zip Code 22046-2613	Transaction ID: PR331533222983 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	110.00	78.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify)		n sident, Policy e Year-to-Date ▼ 819.00	P/R Deduction (\$39.00 Bi-Weekly)
SI	JBTOTAL of Receipts This Page (optional)			222.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 178 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Elizabeth Summy		Date of Receipt
Mailing Address One North Franklin		10 / 31 / 2009
Chicago	State Zip Code	Transaction ID: PR346168122983
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	39.84
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMG	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.56	P/R Deduction (\$19.92 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Kristin Welsh		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	N	10 31 7 9 9 9
City	State Zip Code	Transaction ID: PR517619722983
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President Executive Branch Rel	ati
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	819.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Megan Cundari		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	N	10 31 7 9 9 9
City	State Zip Code	Transaction ID: PR518031922983
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	43.48
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	391.32	P/R Deduction (\$21.74 Bi- Weekly)
CURTOTAL of Descipts This Desc (antional)		161.32

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 178 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Laura M. Werner		Date of Receipt
Mailing Address 325 Seventh Street, N' Suite 700		10 31 7 2009
City	State Zip Code	Transaction ID: PR560101522983
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.44
Name of Employer American Hospital Associa- tion-Washingt	Occupation Project Manager	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	273.96	P/R Deduction (\$15.22 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Carlos Jackson		Date of Receipt
Mailing Address 325 Seventh Street, N	W	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR566280922983
Washington	DC 20004-2802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federal Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	420.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson		Date of Receipt
Mailing Address 606 S. Royal St.		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City	State Zip Code	Transaction ID: PR766023722983
Alexandria	VA 22314-4142	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Policy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	420.00	P/R Deduction (\$20.00 Bi- Weekly)
CURTOTAL of Possints This Page (entional)		110.44

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 178 (check only one) X
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements mage name and add	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Rochelle M. Archuleta Mailing Address 325 Seventh Street, N Suite 700	IW		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR801366322983
Washington FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 28.00
Name of Employer American Hospital Association-Washingt Receipt For: Primary Other (specify) ▼		ssociate Director Policy e Year-to-Date ▼ 294.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky Mailing Address 325 Seventh Street, N	IW		Date of Receipt
Suite 700			10 31 2009
City Washington	State DC	Zip Code	Transaction ID: PR876637222983
FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 42.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify)	, ·	n sident, Legislative Affairs e Year-to-Date ▼ 395.00	P/R Deduction (\$21.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows			Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700			10 31 2009
City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR936292322983
FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 28.00
Name of Employer American Hospital Associa- tion-Washingt	, '	irector of Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 294.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional) .			98.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 178 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. David A. Strickland Mailing Address One N. Franklin Street City	State	Zip Code	Date of Receipt M
Chicago FEC ID number of contributing federal political committee. Name of Employer	C Occupation	60606	Amount of Each Receipt this Period 28.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General Other (specify) ▼	Executive	e Director Quality Center Year-to-Date ▼ 294.00	P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	•	28.00
TOTAL This Period (last page this line number only)	•	141325.91

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 178 (check only one) 11a 11b 11c X 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Hospital and Healthsystem Assoc. of PA - Federa Mailing Address Post Office Box 8600 City Harrisburg FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code PA 17105-8600 C C00128082 Occupation Aggregate Year-to-Date 93550.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 2 2 0 0 9 Transaction ID: 17588966 Amount of Each Receipt this Period 8550.00
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC Mailing Address 5510 Research Park D City Madison FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code WI 53725-9038 C C00359455 Occupation Aggregate Year-to-Date 10450.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal Mailing Address P.O. Box 15587 City Austin FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code TX 78761-5587 C C00301325 Occupation Aggregate Year-to-Date ▼ 51500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		14250.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152 / 178 (check only one) 11a 11b 11c X 12 13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements ma ame and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal			Date of Receipt
	Mailing Address 1215 K Street Suite 800			10 16 7 2009
	City	State	Zip Code	Transaction ID: 17616594
	Sacramento	CA	95814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0237495	20000.00
	Name of Employer	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 140000.00	
В.	Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC			Date of Receipt
	Mailing Address 5510 Research Park Dri	ve		10 23 7 2009
	City	State	Zip Code	Transaction ID: 17628739
	Madison	WI	53725-9038	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0359455	2325.00
	Name of Employer	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 12775.00	

SUBTOTAL of Receipts This Page (optional)	•	22325.00
TOTAL This Period (last page this line number only)	•	36575.00

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 153 / 178
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)	
•			Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17
	ny information copied from such Reports and Sta for commercial purposes, other than using the n			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Citibank, F.S.B.			Date of Receipt
	Mailing Address 1400 G Street, NW			10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 17700775
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		243.64
	Name of Employer	Occupation	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2752.56	Interest Earned

SUBTOTAL of Receipts This Page (optional)	>	243.64
TOTAL This Period (last page this line number only)	•	243.64

		Use separate schedule(3)		R LINE eck only							1017	1/8
IT _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	X	23 28b		24 28c		25 29	2
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)												
\mathbb{Z}	American Hospital Association PAC												
	Full Name (Last, First, Middle Initial) National Republican Senatorial Committee)				Trans Date of		sburs				0 ŏ 9	Y
	Mailing Address 425 Second Street, NE					-							
	City Washington	State Zip Code DC 20002				Amou	nt of	Each	n Dist	ourse	-	this P	-
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	Full Name (Last, First, Middle Initial) Charles Boustany Jr Md For Congress, Inc.					Trans Date of						Y	Y
	Mailing Address PO Box 80126					1 0		٥) 6	Ĺ	2	0 ŏ 9	
	City Lafayette	State Zip Code LA 70598				Amou	nt of	Each	n Dist	ourse		this P	eriod
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	Full Name (Last, First, Middle Initial) Team Emerson For Jo Ann Emerson					Trans Date		sburs	emer			· · ·	V
	Mailing Address P.O. Box 822 400 Broadway, Suite 50					1 ^M 0	,) 6		2	0 ŏ 9	
	City Cape Girardeau	State Zip Code MO 63702				Amou	nt of	Each	n Disk	ourse	ment	this P	erioc
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<u>v </u>	Full Name (Last, First, Middle Initial Heath Shuler For Congress)						Date	of Dis	burse				
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	Mailing Address Post Office I PO Box 280							1 ^M 0	M /	0	6 /	Y 2	o ŏ 9) Y
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	date Name Patrick J.	Tiberi	_			tegory/ Γype				24			
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	y Information copied from such Reports and State or commercial purposes, other than using the na						
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC						
v	Full Name (Last, First, Middle Initial) Rangel For Congress					Transaction ID: 17622890 Date of Disbursement	
	Mailing Address PO Box 5577 Manhattanville Sta					M M / D D D / Y Y Y O Y 9 Y]
	City New York	State Zip Code NY 10027				Amount of Each Disbursement this Per	rio
	Purpose of Disbursement Void of 9/09 check			01	1	-1000.00	_
	Candidate Name Rep. Charles B. Rangel		Ca		gory/		
	Office Sought: X House Senate President State: NY District: 15	sement For: 2010 Primary X General Other (specify)				Void of 9/09 check	
	Full Name (Last, First, Middle Initial) Friends Of Weiner					Transaction ID: 17622891 Date of Disbursement	_
	Mailing Address 1 Ascan Avenue #31 Suite 31					M M M / D D D / Y Y Y O Y 9 Y	
	City Forest Hills	State Zip Code NY 11375				Amount of Each Disbursement this Per	rio
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	Candidate Name Rep. Anthony D. Weiner		Ca	_	gory/		
		sement For: 2010 X Primary General Other (specify) ▼				Void of 9/09 check	
	Full Name (Last, First, Middle Initial) National Republican Senatorial Committe	ee				Transaction ID: 17623454 Date of Disbursement	
	Mailing Address 425 Second Street, NE					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
	City Washington	State Zip Code DC 20002				Amount of Each Disbursement this Per	ric
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam															
Ĭ.	NAME OF COMMITTEE (In Full)	io and addre	oo or arry pormour				011011	00111	1001	10110			011 00			
$ \rangle$	American Hospital Association PAC															
	Full Name (Last, First, Middle Initial) Heller For Congress						1	Trans					6234	57		
	Mailing Address PO Box 750580							1 ^M 0	М	/ D	1	4	Y	ž o	ŏ 9	Y
	City Las Vegas	State NV	Zip Code 89136					Amou	int o	f Eac	h I	Disbu	ırsem	ent th	is P	erio
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	Full Name (Last, First, Middle Initial) Bill Shuster For Congress						1	Date	of D	isbur	se	nent	6234			
	Mailing Address PO Box 27							1 ^M 0	М	/ D	1	4	Y	ž 0	ó 9	Y
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	State: PA District: 09 Full Name (Last, First, Middle Initial)															
	Tim Bishop For Congress							Г rans Date	of D		sei	ment			V	V
	Mailing Address PO Box 437							1 0	IVI	Ľ	1	4	Ľ.	ž o	0 9	
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SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)		OR LINE I neck only		R:		L P	AGE	159 /	178
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	,	(01	21b 27	22 28a	X	23 28b	24 28c	Н	25 29	2 3
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NAME OF COMMITTEE (In Full) American Hospital Association PAC	,,										
Full Name (Last, First, Middle Initial)					Trans	actio	on ID:	1762	3462		
Mike Ross For Congress Committee					М	of Dis	sburse	ement 4	YYY	0 ŏ 9	Υ
Mailing Address PO Box 360					1 0						
City Prescott	State Zip Code AR 71857	_			Amou	nt of	Each	Disburs			eriod
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Candidate Name Rep. Michael Avery Ross		C	ateg Typ	jory/ e							
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Giffords For Congress					Date of		sburse	_			Υ
Mailing Address PO Box 12886					1 0		1	4	2	0 ŏ 9	
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Full Name (Last, First, Middle Initial) Gene Green Congressional Campaign							on ID: sburse	1762 ement	3465		
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	y Information copied from such Reports and State for commercial purposes, other than using the nar											
$ \rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC											
	Full Name (Last, First, Middle Initial) Citizens For Rush Mailing Address P. O. Box 7292					Date		burser	D /		0 ŏ 9	Y
	City Chicago	State Zip Code IL 60680				Amou	nt of I	Each [Disburs	-	t this P	-
	Purpose of Disbursement Contribution Candidate Name Rep. Bobby Lee Rush		Ca	01 ateg	ory/		•			10	00.00	
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	City Tacoma	State Zip Code WA 98401				Amou	nt of I	Each [Disburs		t this P	-
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American Hospital Association	on PAC									
Full Name (Last, First, Middle Initia	al)					action ID		2312		
America Works Committee					Date o	f Disburs		v v		V
Mailing Address 607 14th St Ste. 800	reet, NW				1 0		21 /	2	0 0 9	
City Washington	State DC	Zip Code 20005			Amour	nt of Each	Disburs	ement	this Pe	erio
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President	1	specify) \blacktriangledown								
State: District:										
Full Name (Last, First, Middle Initia						action ID		2331		
Friends Of Mary Landrieu Inc	,				Date o	f Disburs		ΥΥ	Y	Υ
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City Washington	State DC	Zip Code 20005			Amour	nt of Each	Disburs	ement	this Pe	erio
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Candidate Name Sen. Mary L. Landrieu			Cate	gory/						
Office Sought: House	Disbursement For				Contri	hution				
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State: LA District:	Other (s	specify) \								
Full Name (Last, First, Middle Initia Earl Pomeroy For Congress	al)					action ID f Disburs		2360		
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City Fargo	State ND	Zip Code 58106			Amour	nt of Each	Disburs	ement	this Pe	erio
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	Full Name (Last, First, Middle Initial) Robert Aderholt For Congress					ction ID: Disburse		2379		
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	City Haleyville	State Zip Code AL 35565			Amoun	t of Each	Disburs			eriod
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	Candidate Name Rep. Robert B. Aderholt		Cate	egory/ ype						
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	Mailing Address PO Box 225				1 0		1 ′	2	0 Ŏ 9	_
	City Colonia	State Zip Code NJ 07067			Amoun	t of Each	Disburs			erio
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	Candidate Name Rep. Leonard Lance			egory/ ype						
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	Full Name (Last, First, Middle Initial) Roskam For Congress Committee					ction ID: Disburse		2387		
	Mailing Address P. O. Box 713				1 ^M 0 M	[/] 2	D /	^Y 2	0 ŏ 9	Υ
	City Wheaton	State Zip Code IL 60187			Amoun	t of Each	Disburs	ement	this P	erio
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	Candidate Name Rep. Peter Roskam			egory/ ype						
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SCHEDULE B (FEC Form 3X)		arate schedule(s)			OR LIN			R:		P	AGE	163	/ 178
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American Hospital Association PAC													
Full Name (Last, First, Middle Initial) Rush Holt For Congress									on ID:	17632 ement	2393	3	
Mailing Address PO Box 782							1 ^M 0	M	^D 2	D /	Ž	o ŏ s) Y
City Pennington	State NJ	Zip Code 08534					Amou	nt of	f Each	Disburse	emer	t this	Period
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Full Name (Last, First, Middle Initial)						+	Trono	ooti	on ID:	17632	200/	<u> </u>	
Bachus For Congress Committee									sburse		2092	•	
Mailing Address P.O. Box 131134							1 ^M 0	M	^D 2	1 /	Ž	o ŏ s) Y
City Birmingham	State AL	Zip Code 35213					Amou	nt of	f Each	Disburse	emer	t this	Period
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Candidate Name Rep. Spencer Thomas Bachus, III					egory/ ype								
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Friends Of Joe Baca							Date		sburse				V
Mailing Address 555 Capitol Mall Suite 1	425						1™0	IVI	^D 2	1 / I	2	o ŏ s)
City Sacramento	State CA	Zip Code 95814					Amou	nt of	f Each	Disburse	emer	t this	Period
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NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Berman For Congress Mailing Address 6380 Willshire Blvd. #1612 City State Zip Code CA 90048 Purpose of Disbursement Contribution Candidate Name Rep. Howard L. Berman Office Sought: X House President Sacramento CA 95841 Purpose of Disbursement CA 95841 Purpose of Disburs	TEMIZED DISBURS	SEMENTS for		ge 21	b 22 X 23	
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<i></i>	Full Name (Last, First, Middle Initial) Pallone For Congress				Transaction ID: 17632407 Date of Disbursement
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	Mailing Address 4190 Vinewood Lane #111-554			1 0 M / D 2 9 / Y 2 0 0 9 Y		
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	Mailing Address 325 Seventh Street, NV Suite 700	V		10		
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